MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

ELECTRONIC SUBMISSION MANUAL

October 4, 2002

Michigan Department
of Community Health

M DCH

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M E D I C A L
S E R V I C E S
ADMINISTRATION

Tables

FOREWORD

This manual describes how to submit data electronically to the Michigan Department of Community Health (MDCH). The focus of the manual is primarily on submitting claims (billing), but the information applies equally to other types of data submitted electronically. (Additional instructions for submitting data electronically from Community Mental Health and Substance Abuse Coordinating Agencies are contained in supplementary manuals.)

This manual replaces the MDCH Electronic Billing Manual issued December 20, 2001.

For entities that submit claims to MDCH, this manual provides an overview of the MDCH Invoice Processing System. The information applies to all claims submitted to the MDCH for:

- Medicaid,

- Children's Special Health Care Services (CSHCS), and

- the State Medical Program (SMP).

MDCH encourages those entities (providers or their agents) that submit claims to MDCH to become "electronic trading partners" (also known as electronic billers, e-billers, electronic billing agents, service bureaus).

There are several advantages to submitting claims and other data electronically:

- Electronic data reduces the need to re-type information and eliminates the introduction of errors.

- Electronic claims can be processed and paid much more quickly.

- Electronic claims have fewer errors so bills don't have to be resubmitted.

- Electronic claims can be posted more easily.

- Electronic claims can be used for additional services, such as claim status information.

Becoming an electronic submitter is easy. Entities (electronic billing agents or providers themselves) that wish to submit data

to MDCH electronically need to complete only a few steps to become authorized.

1. Contact the MDCH Automated Billing Unit for an application packet. (See information below.)

2. Complete and submit the forms. (See Section 1, "Authorization to Submit Data Electronically.")

3. Receive an identification number.

4. Format and submit test files. (See Section 3, "InitialTesting," Section 4, "Preparing Electronic Files," and Section 5, "Using the Data Exchange Gateway.")

5. Receive notice to submit production data electronically once test files are approved.

Prospective electronic submitters are urged to review these instructions carefully. Questions can be addressed to the Automated Billing Unit by e-mail or through the information line.

E-mail: AutomatedBilling@michigan.gov

Information Line: 1-800-292-2550

Current electronic submitters (i.e., "billing agents" or "service bureaus") should provide their identification numbers ("service bureau ID numbers") when they contact the Automated Billing Unit.

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1   AUTHORIZATION TO SUBMIT DATA ELECTRONICALLY

Entities that wish to bill the Michigan Department of Community Health or otherwise submit data electronically must be authorized by MDCH. This section describes that process.

1.1   AUTHORIZATION TO PARTICIPATE

Application forms for authorization can be obtained from the following email address:

AutomatedBilling@michigan.gov

1.2   APPLYING FOR AUTHORIZATION

At least one completed **original** application and participation agreement (Figure 1-1, Billing Service Company Certificate) must be on file with the Automated Billing Unit.

STATE OF MICHIGAN

JOHN ENGLER, Governor

DEPARTMENT OF COMMUNITY HEALTH

LEWIS CASS BUILDING
LANSING, MICHIGAN 48913
JAMES K. HAVEMAN, JR., Director

BILLING SERVICE COMPANY CERTIFICATE

The Service Company certifies that all invoice information submitted by the Service Company to MDCH is a true and correct report of information received from the service company's enrolled providers.

The service company understands that payment and satisfaction of claims submitted by the service company to MDCH will be from federal and state funds, and that any false claim, concealment of material facts, or falsified data systems input may be prosecuted under federal and state law. Any variations between provider billing and service company automated input to MDCH will be considered the responsibility of the Service Company and will be considered grounds for removal from the Automated Billing Program.

_____
(Name of Authorized Representative - Print)

_____
(Signature of Authorized Representative)

_____
(Name of Service Company - Print)

_____
(Date)

DCH-0357 (3/98)

Figure 1-1:   Billing Service Company Certificate

1.3   RECEIVING AUTHORIZATION

Once the systems test is successfully completed, a prospective electronic submitter will be notified that they can participate in the Automated Billing Program. The notification will specify the parameters that are unique to the submitter.

A Medicaid Billing Agent Authorization form must be completed by each provider authorizing the submitter to send bills or other data on a provider's behalf. Electronic submitters must have each provider they represent submit the Medicaid Billing Agent Authorization (DCH-1343 (3/01)) form (see Figures 1-2 and 1-3) immediately after they are notified of a successful systems test. A DCH-1343 must be sent to MDCH by each provider the submitter serves or by each provider who is new to a submitter. This form certifies that all services the provider has rendered are in compliance with Medicaid's guidelines. A copy of the form may be obtained from the Provider Enrollment Unit at the address noted in Section 1.4.

Only one electronic submitter per provider will be authorized to submit the provider's claims electronically. The provider's most recently authorized electronic submitter will be considered the only allowable agent to prepare claims electronically. **Authorizations remain effective unless otherwise indicated in writing by the provider**.

MEDICAID BILLING AGENT AUTHORIZATION

Michigan Department of Community Health

COMPLETION INSTRUCTIONS:

- Type or Print All Information.
- See reverse side for Certification Conditions, Non-discrimination and PA 431 Information.
- Photocopies of this form will **NOT** be accepted.
- A separate, original form must be submitted for **EACH** provider.
- Copy both sides of this form for **YOUR** files.

NOTE: "Billing Agent" is the business authorized by the Michigan Department of Community Health (MDCH) to submit Medicaid claims via electronic media.

I authorize (1. Billing Agent Name) _____ ,

2. Billing Agent Identification Number) _____ to act as my agent for the purpose of preparing, processing and submitting claims on my behalf under the following Medicaid Provider Identification Number(s):

3. Medicaid Provider Identification Number: | | | | | | | | 4. Provider Type Code: | | |

PROVIDER CERTIFICATION:

- I understand that 1) payment will be from federal and state funds and 2) I may be prosecuted under applicable federal or state criminal and civil laws if my billing agent submits false claims or documents or if I or my agent makes misrepresentations, conceals material facts, or conspires to engage in any of the above actions.
- I understand that it is my responsibility to notify my billing agent, upon receipt of the notice of my authorization from MDCH, before beginning to submit Medicaid claims.
- This authorization shall remain in effect until I notify the MDCH in writing to the contrary or MDCH negates it.
- As a condition of receiving payment from Medicaid and programs for which the MDCH is the fiscal intermediary for services billed on my behalf, I certify and agree to all of the provider certification conditions above and on the **reverse side** of this document.

5. Provider's Name *(print)*	6. Provider's Phone Number ( )
7. Provider's Signature *(Facsimile signatures will NOT be accepted)*	8. Date

BILLING AGENT CERTIFICATION:

- I am a representative of the business authorized by MDCH to submit Medicaid claims via electronic media. My signature below signifies agreement to the billing agent certification conditions on the reverse side of this document.

9. Billing Agent Representative's Name and Title Name (print)	10. Billing Agent's Phone Number ( )
11. Billing Agent Representative's Signature *(Facsimile signatures will NOT be accepted)*	12. Date

RETURN TO: PROVIDER ENROLLMENT
MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
PO BOX 30238
LANSING MI 48909

DCH-1343 (3/01) (W) Replaces and Obsoletes MSA-1343

Figure 1-2:   Medicaid Billing Agent Authorization Form (DCH-1343) for Providers to Submit Data Electronically to MDCH (Front)

PROVIDER CERTIFICATION CONDITIONS

I, the provider, agree to and certify as follows:

1. All the information I have furnished on this Billing Agent Authorization is true and complete.

2. All claims prepared, processed and submitted at my direction are true and valid claims for goods or services I properly provided to an eligible recipient under the applicable rules, regulations and polices of the MDCH.

3. I am responsible for the accuracy and completeness of all claims transmitted to and by my billing agent.

4. I am responsible for:
   a) reconciling my Medicaid accounts within 30 days after a remittance advice mailing, and
   b) notifying the MDCH of any payment errors and returning any overpayments due to these errors within the same 30 day period.

5. I acknowledge that my billing agent's signature constitutes my signature for all purposes related to Title 19 (Medicaid) reimbursement by the MDCH, including any administrative, civil or criminal action relating to my participation in the Medicaid program. A lack of my billing agent's signature on claims made on my behalf shall not be used to avoid criminal and / or civil responsibility.

6. I will adhere to all rules, regulations and policies of the MDCH in billing services. These rules, regulations and policies are contained in my Medicaid Provider Agreement, the Medicaid Provider Manual (including manual updates, bulletins and / or other program notifications), and the Michigan Uniform Procedure Coding (MUPC) Manual and all other manual.

7. I may have disputed claims adjudicated in administrative hearings based on Act 280 of Public Acts of 1939, as amended, or in a court of law. If necessary, the state will pursue criminal and / or civil actions.

BILLING AGENT CERTIFICATION CONDITIONS

I, the billing agent, agree to and certify as follows:

1. All invoice information I submit to the MDCH on behalf of my client is a true and correct report of the information received from my client.

2. I understand that I may be prosecuted under applicable federal and state criminal and civil laws for submitting false claims, concealing material facts, misrepresentation, falsifying data systems input, other acts of misrepresentation, or conspiracy to engage therein.

3. I will maintain claims data for six(6) years from the date of the service and be able to reproduce claims for resubmission or audit upon request from the MDCH.

4. Before billing for any medical services I will review and fully comply with the MDCH's Automated Billing Manual, the MUPC and all other manuals required for billing purposes.

5. I will allow, upon request, and at a reasonable time and place, authorized federal or state government agents to inspect, copy, and / or take any records I maintain on the services provided and billed on behalf of my client.

Authority: Title XIX of the Social Security Act **Completion:** Is Voluntary, but is required for authorization of billing agent submission of claims.	The Department of Community Health is an equal opportunity employer, services, and programs provider..

DCH-1343 (3/01) (W) (Back)

Figure 1-3: **Medicaid Billing Agent Authorization Form (DCH-1343) for Providers to Submit Data Electronically to MDCH (Back)**

1.4 COMPLETING THE AUTHORIZATION PROCESS

An **original** (no photocopies) of the DCH-1343 must be completed by the provider according to the instructions on the form. The pink copy should be retained by the provider, the electronic trading partner ("billing agent") should keep the yellow copy, and the original should be forwarded to the following address:

Provider Enrollment Unit
MDCH
P.O. Box 30238
Lansing, MI 48909-7738

The provider will be notified in writing or by e-mail when the DCH-1343 has been processed. The provider must then notify the electronic trading partner to begin submitting claims on the provider's behalf. (Electronic submitters who wish to receive the notification directly should enclose a return envelope when they send in the form.)

Processing of the DCH-1343 takes approximately two weeks. If the provider does not receive a response to the DCH-1343 within four weeks, a new form must be submitted. A provider's claims prepared by an unauthorized electronic submitter will be rejected with explanation code 013 ("The invoice was submitted by Electronic File without authorization from the provider").

1.5   REVOKING AUTHORIZATION

The authorization to submit data electronically may be revoked at any time. The electronic submitter may reapply for participation and undergo another systems test.

2   INTRODUCTION TO MDCH ELECTRONIC SUBMISSION

The electronic submission system is made up of several elements. This section provides an overview of those elements and how the system works. (Note: These processes apply primarily to electronic *billing* and may not apply to all other data submissions.)

2.1   ELECTRONIC BILLING SYSTEM OVERVIEW

Electronic billing (also referred to as "automated billing") is made up of two transactions: submission by an electronic submitter to the **Invoice Processing System,** and the resulting **Remittance Advice** sent to the electronic submitter. Each is described here.

2.1.1   Invoice Processing System

Claims submitted by electronic file transfer are processed through the MDCH Invoice Processing (IP) System, the same system used for processing paper claims.

The IP System consists of several cycles:

- The **daily cycle** is the first set of computer programs to process all claims. The daily cycle is run four to five times each week. It performs all *intra*-claim editing (e.g., provider and recipient eligibility, procedure validity). All claims are reported out as pended, rejected, or tentatively approved.

- The **weekly cycle** is run once each week using the tentatively approved claims from the daily cycles that were run during the previous seven days. The weekly cycle includes *inter*-claim editing using an historical file of all claims paid during the previous 24 months. Inter-claim editing includes duplicate claims, procedures with frequency limitations, and the number of refills on a prescription. The Provider's Warrant and Remittance Advice are also generated from this cycle. All claims are reported as approved for payment, rejected, or pended.

- Claims that cannot be processed against the current history file ("**aged claims**") are held for processing against an archived file and are resolved manually. All claims are reported as approved for payment, rejected, or pended.

Pended claims are reviewed by the MDCH and, after appropriate resolution, these claims are again processed through the daily and weekly cycles as if they were new claims.

All initial claims, replacement claims, and rebillings of previously rejected claims may be submitted as electronic files. The electronic submitter should refer to the appropriate provider manual, available from the MDCH (see Section 7.1), for instructions.

2.1.2   Remittance Advice

Once claims have been submitted and have been processed through the IP system, a paper Remittance Advice (RA) is sent to the provider and an electronic Remittance Advice file is sent to the electronic submitter. The paper Remittance Advice indicates the status of all the provider's claims received by the MDCH. The electronic RA file covers all claims submitted both on paper and electronically by the electronic submitter. **Claims rejected due to systems errors do not appear on either the paper or the electronic RA.**

The RA may be used by the electronic billing agent for different reasons:

- **Update** the provider's accounts receivable,

- **Maintain** the status of pended claims,

- **Report** to the provider commonly encountered errors that may have been a result of the provider's clerical errors, and

- **Monitor** the submitter's own system to ensure that the required editing is performed properly.

2.2   PARTICIPATION

Any entity capable of submitting claims on a regular basis may apply to participate in the Automated Billing Program. Such an entity may be either a provider who rendered service to a patient or an entity who is authorized to submit data on behalf of a provider.

The Automated Billing Unit maintains a public listing of currently authorized electronic submitters who participate in the MDCH Automated Billing Program. An electronic submitter may request to be included on this listing.

NOTES: The MDCH does not recommend any electronic submitter or guarantee the competency of any electronic submitter on the list. Information about **all** electronic submitters can be made available to members of the public who request it, whether or not an electronic submitter chooses to be included in the public listing.

There is no maximum or minimum number of claim lines that must be sent by an electronic submitter.

Every electronic submitter must pass a systems test under the direction of the Automated Billing Unit before being authorized to submit claims. The purpose of this test is to verify that the electronic submitter is capable of properly encoding, assembling, and editing the claim data. (This testing procedure is explained in more detail in Section 3.)

2.3 ELECTRONIC SUBMITTER RESPONSIBILITIES

An electronic submitter assumes the following responsibilities to the provider and to MDCH:

a. The electronic submitter must maintain sufficient documentation to provide a complete audit trail from the provider submitting data, to the electronic submitter, to the submission of claims for payment. This includes individual claim data, procedure coding, and pricing data if the electronic submitter maintains such information on file for the provider. This documentation must be available to the MDCH on request. The electronic submitter must make its software and hardware available for audit on request by the MDCH.

b. The electronic submitter must be able to identify and reconstruct any claim that was paid by MDCH. **This data must be maintained for a period of six years from the date of service.**

c. Systematic claim errors generated by the electronic submitter must be reported to the provider and the Automated Billing Unit immediately. It is the electronic submitter's responsibility to correct such errors.

d. The electronic submitter must be able to encode all possible configurations of the claim types submitted. Such configurations include:

  - All applicable data fields,

  - Multiple service lines,

▪ Remarks, and

▪ Supporting claim documentation.

e. The electronic submitter must perform certain edits (such as the Modulus Eleven Check-Digit Routine for all provider and recipient IDs, as shown in Appendix B2) on the claim data to ensure validity and mathematical correlation.

f. The electronic submitter is required to correct any billing errors attributed to the submitter or its system.

g. All beneficiary records maintained by the electronic submitter on behalf of the provider are confidential. This information is not to be divulged to unauthorized persons or agencies.

h. The electronic submitter must, on request by authorized agents of the state or federal government, make available for examination any record required to be maintained.

i. Examination of any records outside a recipient's period of eligibility, or a provider's enrollment period, requires a release statement signed by the recipient or provider, respectively.

j. Information regarding electronic submitters is considered available to the public.

2.4   AUDITS

Occasionally, a systems audit may be performed by the MDCH. The audit may be one of the following types:

- **Routine** systems test – Claim Files ready for production may be subject to a systems test similar to the initial systems test. (Section 3.2 details the initial systems test.) If the files fail this test, the electronic submitter will be notified of the problem. Electronic submitters who fail to correct a problem will have their authorization to participate revoked.

- **Examination** of all software and hardware used in preparing claims, questions to the electronic submitter's employees, and examination of all claim records may be required. The electronic submitter may also be required to process test data that is prepared by the MDCH for analysis.

NOTE: Systems documentation supplied by the electronic submitter, or compiled by the MDCH as a result of an on-site systems audit, is considered confidential.

3   INITIAL TESTING

All electronic submitters must complete the initial testing procedures successfully. Entities that submit claims for payment ("bills") must successfully complete the initial testing procedures for **each claim type and format**, as described in the following sections. For updates to this process, see the numbered policy letters at the MDCH Web site.

3.1   ELECTRONIC TEST FILE SPECIFICATIONS

Prospective electronic submitters should complete internal systems testing to ensure that their billing systems are capable of producing electronic claim files that contain properly prepared and edited claim data. The specifications for these files are found in Section 4 and the appendices to this document.

Each electronic submitter must prepare a test file to be submitted to the Automated Billing Unit. The Automated Billing Unit staff will assign an ID number for the electronic test file.

The **ID Number** (also known as the "Billing Agent ID Number" or "Service Bureau ID") is a four-digit alpha or numeric code used to identify all electronic files submitted to MDCH; it must be included in all records.

An electronic test file should consist of data from a minimum of 25 previously submitted or new claims. This test file must conform to the specifications outlined in Section 4.

NOTE: Claims contained on a test file will not be processed for actual payment.

3.2   INITIAL TEST EVALUATION

Systems tests are evaluated on the basis of four criteria. Failure of **any** of these criteria is considered a failure of the entire test.

1. **Format:** Claim data must be in ASCII format. Records may be fixed or variable length, with the ending spaces dropped.

2. **Encoding:** Claim data is considered properly encoded if it can be interpreted correctly by the IP system. This includes the Modulus Eleven Check-Digit Routine found in Appendix B2.

3. **Record assembly (UB-92/EMC 5.0 only):** After the claim data has been encoded into the appropriate record format (one record per block separated by a "Carriage Return" (8 "ØD") and a "Line Feed" (8 "ØA")), these records must be properly assembled into claim record sets and an appropriate Claim Reference Number assigned to each record set. Each file will begin with a **header record** and end with a **trailer record** containing the correct record count of the file. (See Appendix B1.)

4. **Claim Editing:** Claim data will be considered properly edited if the explanation codes reported by the IP system do not indicate conditions that must be edited. Significant volumes of any edit or failure to complete the claim as required by the MDCH will also cause the test to fail.

The electronic submitter will be notified of the test results. Specific claim-oriented details of the systems test will be available if the test passes the first three criteria mentioned above.

3.3   RETESTING

If the electronic submitter failed any of the criteria, they may submit a new electronic test file after correcting the problems.

The electronic submitter may request no more than three retests per claim type in any three-month period.

The initial test and three retests in any one-year period are provided at no charge to the electronic submitter. Any additional retesting may require an additional charge per test.

4   PREPARING ELECTRONIC CLAIM FILES

Before any file can be submitted to the MDCH Invoice Processing System, whether for testing or actual payment, the file must be prepared. This section describes that preparation as well as the file transfer system through which the file is submitted.

4.1   INTRODUCTION TO THE FILE TRANSFER SYSTEM

The File Transfer System provides a standardized method for MDCH to exchange files with an outside source (user or trading partner).

This system is designed to:

- satisfy security measures;

- automate file transfers;

- allow for flexible hours and workload volumes;

- provide expanded communication protocol support;

- balance and verify files transferred to and from MDCH; and

- provide an audit trail of files transferred between MDCH and a user.

To maintain a highly secure environment, a communications gateway is being used to interface MDCH with users. All data files coming into and going out of MDCH are stored on the gateway computer. At scheduled times of the day, MDCH exchanges data between the gateway computer and the mainframe.
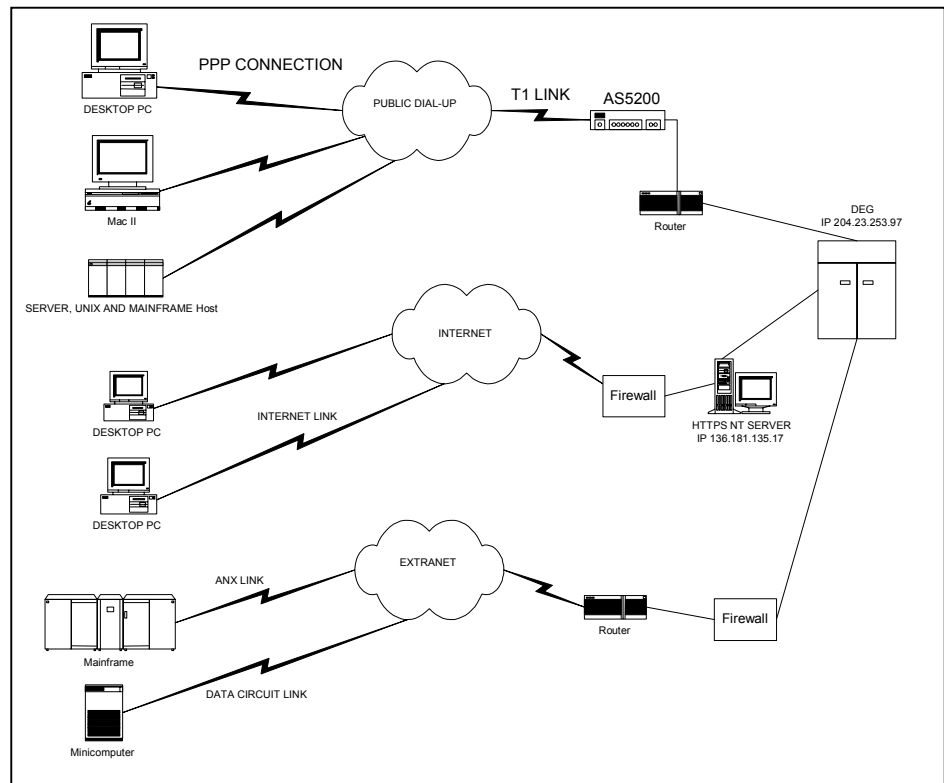
Figure 4-1:   MDCH Communications Gateway

The telephone number for the gateway is **517-373-6181**. Software associated with the modem pool looks for the next available line if the first line is busy.

4.2   FILE REQUIREMENTS

Electronic files submitted to the MDCH through the Data Exchange Gateway (DEG) must meet the following requirements.

The following requirements apply to all ANSI X12 837 and UB-92/EMC 5.0 claims:

a. The deadline for electronic file input to each weekly processing cycle is Wednesday at 5:00 p.m., except as may be affected by holidays.

b. Electronic submitters who notify the Automated Billing Unit staff by e-mail may choose not to receive the electronic Remittance Advice file.

c. No compression is allowed at this time.

The following requirements apply only to UB-92/EMC 5.0:

d. Each electronic file must contain at least one complete batch. There is no maximum number of batches that may be submitted in any one electronic file. There is no maximum number of claims that can be submitted.

e. All batches in an electronic file must be complete and unique to that file; that is, a batch cannot appear in two electronic files.

f. File Transfer Control records are required at the front and back of every file being transferred with MDCH. These control records validate users and files. Specifications for these control records are discussed in Section 4.2.1.

4.2.1   Electronic File Preparation for the UB-92/EMC 5.0 Claims

Specific control records are required for the File Transfer System.

•   Each electronic file must **start** with an MDCH header record containing the electronic submitter identification number.

•   Each electronic file must **end** with an MDCH trailer record containing the electronic submitter identification number and the record count of the file, including the header and trailer records.

Specifications for the header and trailer records are found in Appendix B1.

Electronic submitters can use the MDCH TR9000 personal computer (PC) program or they can code the control records themselves. The TR9000 program can be obtained by e-mail from:

AutomatedBilling@michigan.gov

Appendix A contains instructions for using the MDCH TR9000.

4.2.2   Sending UB-92/EMC 5.0 Claim Files to MDCH

Each file that is sent to MDCH must have only two control records: one at the front and one at the back of the file. More than one file with the same name can be sent on the same day; each will be listed individually.

4.2.3   Sending ANSI X12 837 Claim Files to MDCH

All ANSI X12 files have header and trailer data built into them.

4.2.4   Receiving Files from MDCH

When electronic submitters receive a file from MDCH, such as a Remittance Advice or ANSI X12 997 Acknowledgment (for example, a 4780 with the same number as the input file), each file will be listed by its filename, size in bytes, and date loaded to the user's mailbox. Once a file is downloaded, it will disappear from the user's view. To download that file again, the user must call the Information Line at 1-800-292-2550 to have the file retrieved. (The Remittance Advice and ANSI X12 997 Acknowledgment are found in Appendix C.)

4.2.5   File Back-Up

Electronic submitters should copy transferred files immediately as a back up for their site.

It is the agent's responsibility to retain back-up files until the party at the final destination has verified and backed up the files. Should the file not be received in its entirety, it may have to be resent using the back up. MDCH retains back-up files sent to users; likewise, users should retain back-ups of the files sent to MDCH.

5   USING THE DATA EXCHANGE GATEWAY (DEG)

The State of Michigan has established two communications connections for the Data Exchange Gateway: (1) a point-to-point protocol (PPP) modem communications connection, and (2) a Secure Sockets Layer (SSL) Internet connection. (See Figure 4-1.) These connections are independent of the platform used to transmit data, whether it is from a Unix, Apple, mainframe, or Windows-based personal computer.

Instructions for using the PPP connection are provided below; instructions for connecting via the new SSL connection are contained in a separate document found at the MDCH Web site with this manual.

5.1   POINT-TO-POINT PROTOCOL

Connecting to the Data Exchange Gateway via modem is a two-part process: (1) establishing a connection with the point-to-point protocol (PPP) and (2) establishing a connection with a file transfer protocol (FTP).

Specifications for these connections are described below, followed by step-by-step instructions on how to establish and use those connections. The PPP server is a T1 connection divided into twenty-four 56 kbps (kilobytes per second) connections.

5.1.1   Hardware, Software, and Connection Requirements

Transmitting Computer: Any

Modem: Up to 56 kilobytes per second

Software: **Both** PPP Dialup and FTP (File Transfer Protocol) required once a connection is made into the DEG. (Windows 95 and NT both have PPP and FTP software built in.)

PPP phone number: 517-373-6181

TCP/IP address: 204.23.253.97

5.1.2   Getting Started with the Point-to-Point Protocol

The following instructions are provided as an example of how to establish a connection using Microsoft Windows software on a personal computer (PC). Since PPP does not depend on a particular platform or software, all of the possible methods of connecting cannot be addressed here. If there are questions about the computer a file is being sent from, contact the local systems administrator.

1.   Double-click the My Computer icon on the computer desktop. The icons available on this computer will be shown (Figure 5-1).

Figure 5-1:   Selecting the Dial-Up Networking Icon

2. Double-click the Dial-Up Networking icon in the My Computer configuration window. The Dial-Up Networking option will show (Figure 5-2).
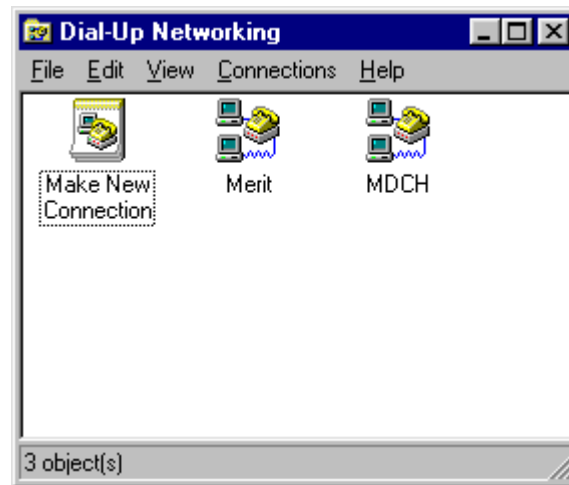
Figure 5-2:   Dial-Up Networking Options

3. Double-click the Make a New Connection icon. The Make New Connection window appears (Figure 5-3).

4. Enter **MDCH** and select a modem or accept Standard Modem. Click **Next**.
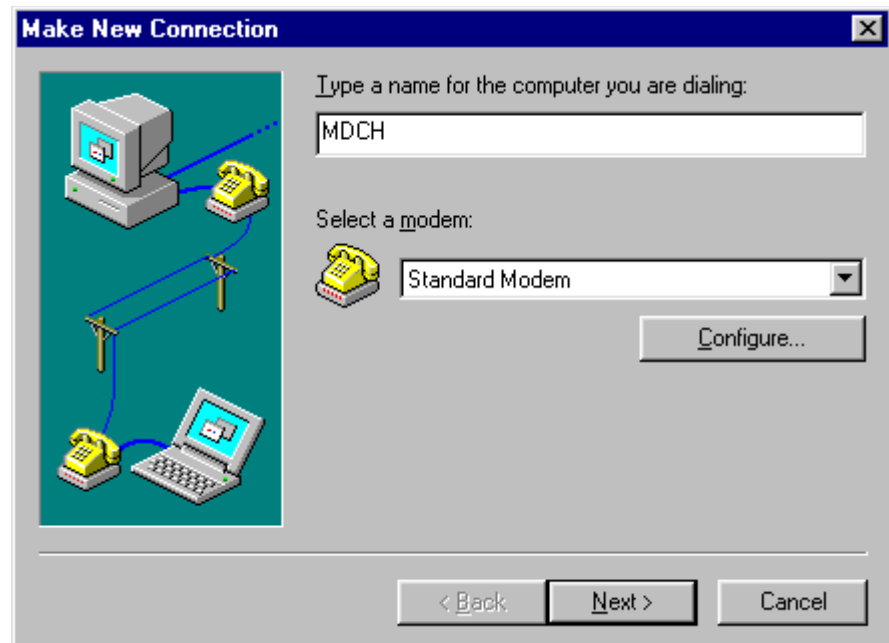
Figure 5-3:   Naming the Modem Connection

5. In the Make a New Connection window, enter the area code **517** and telephone number (**373-6181**) in the appropriate fields; then enter **United States of America (1)** as the country code (Figure 5-4). Click Next.

Figure 5-4:   Specifying the Modem Connection

6. Click Finish. A new connection is established (Figure 5-5). The Make New Connection window automatically closes, and the connection icon appears in the My Computers window.
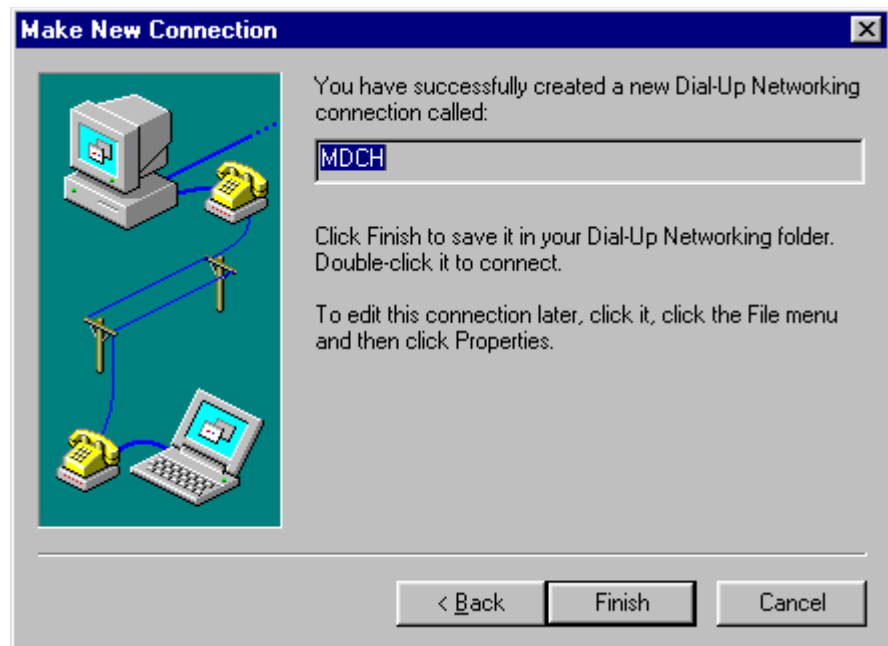
Figure 5-5:   New Dial-Up Connection Confirmation Window

7. Return to the Dial-Up Networking window.

8. Select the MDCH icon just created by clicking on it once to select it.

9. Click File from the menu bar; then select Properties from the drop-down list. The window in Figure 5-6 appears.

Figure 5-6:   Verifying Dial-Up Connection Settings

10. Verify that the information is correct; then click the Server Type tab. The window in Figure 5-7 will appear.
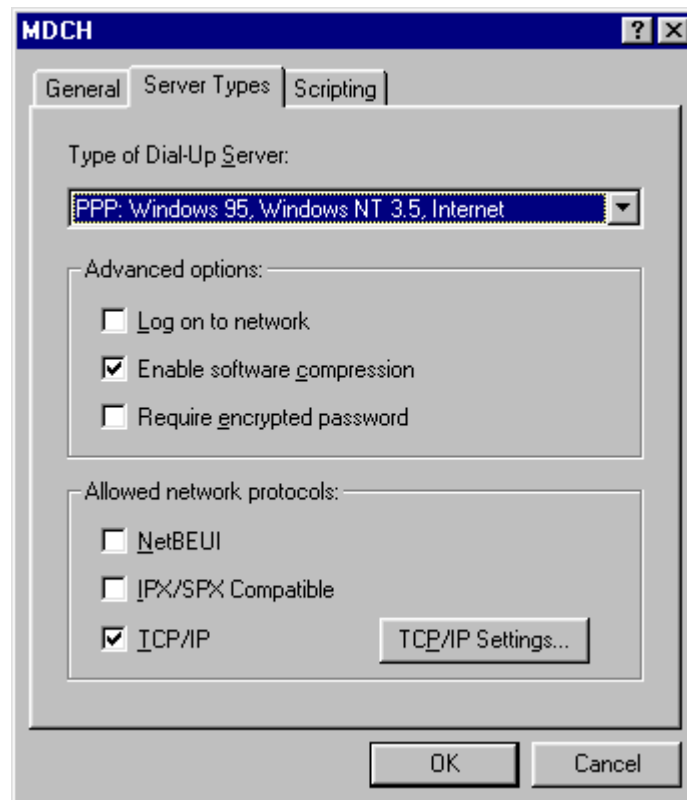
Figure 5-7:   Server Types Window

11. Select the Type of Dial-Up Server shown, check the box next to Enable software compression by clicking in it once, and check TCP/IP box; then click the TCP/IP settings button. The window in Figure 5-8 appears.
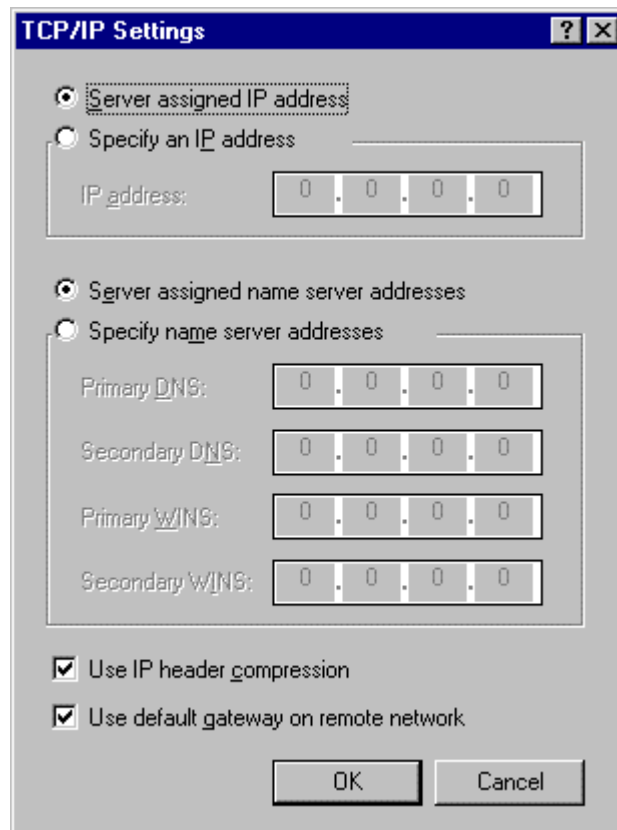
Figure 5-8:   TCP/IP Settings Window

12. Modify the window on the computer to look like the window in Figure 5-8; then click **OK**. Click **OK** again to close the MDCH window. The PPP software is ready.

13. To log on to the PPP process, go to the Start menu, and select Programs, Accessories, and Dial-Up Networking.

14. Double-click the MDCH icon.

15. The Connect To window appears (Figure 5-9).
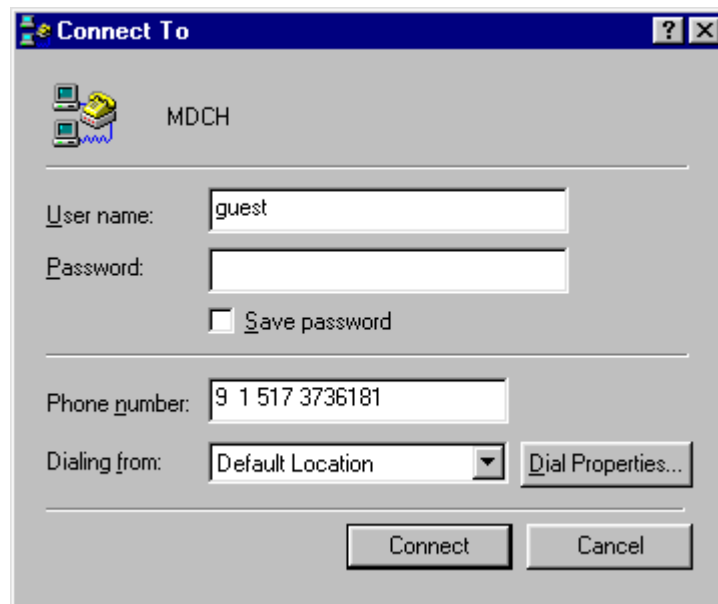
Figure 5-9:   Connecting to the MDCH Gateway

16. Enter the user name and password **guest**. (This user name and password will establish that a connection has been made. Other user names and passwords are used for testing and production.)

17. Verify that the correct telephone number appears in the correct field.

18. Click Connect.

19. Once the connection is established (the sounds of the dialing and connection will be heard), the PPP window minimizes itself.

20. Close the Dial-Up Networking window.

5.1.3   Starting the File Transfer Protocol (FTP) Session in the Test Environment

The following example is based on the software that comes with Windows 95 or NT. It is similar to the DOS commands used by other operating systems. Other Windows-based FTP software is available. **NOTE**: When using graphical user interface (GUI) FTP software, the options will need to be set to prompt for a remote destination when "putting" a file to the DEG. The DEG is very specific to the syntax described in the "put" command below.

1.   To start an FTP session, click the **Start** button in the lower left corner of the computer screen.

2.   Click Run from the Start menu.

3.   Enter **ftp 204.23.253.97** in the open field; then click **OK**.

4. Once the FTP software starts, a DOS window appears, and the DEG asks for a user ID. Enter **dchØØXX**, where XX represents the last two digits of the user ID number, and press the Enter key. (Until a user ID is established, electronic submitters may use **dchtst5** or **dchtst6** to test the connection.)

5. When prompted for a password, enter the user ID you entered in the previous step and press Enter.

6. Once the DEG responds, choose an action from Table 5-1.

Table 5-1.   FTP Commands for the DEG

Command	Description	Example
cd	Change directory	**cd<space><directory name>** For instance, type **cd<space>dchbull** to view files you sent to the DEG; type **cd<space>dchØØXX** to return to your user ID number.
dir	Show directory of files waiting	
put	Move a file to the DEG	**put<space>c:\4275t 4275t@dchedi** (for ANSI X12 837 v 4010 and 3051 files) or **put<space>c:\4275t 4275t@dchbull** (for UB-92 files). The "t" at the end of the file name indicates this is a test file.
get	Receive a file from the DEG	**Get<space>4276t<space>c:\4276t**
user	Change User ID number	
del	Delete a file from the DEG	**del<space>4276t** (Deletes all files of this number!)
quit	End the FTP session	
help	Shows a list of commands	
bye	Ends session	

7. To end the FTP session, type **bye**.

8. To end the PPP session, click the minimized Dial-Up Networking icon at the bottom of the screen. Click Disconnect.

File Naming Standards: Any file name that ends with a "t" will not be delivered to the production environment. A "t" designates a testing file.

5.1.4   Using PPP and FTP in the Production Environment

When making a PPP connection, use the user ID and password **guest** (lowercase for both) for the PPP connection. When making the FTP connection, use the user ID and password DCHØØXX, where XX represents the numeric electronic ID assigned by MDCH.

Once the logon is accepted and the prompt **ftp>** appears (as shown in Figure 5-10), type **dir** to select the directory of files available.

```
ftp                                                            _ 8 X

Auto    ▼   [][][][][][]  A

Connected to 204.23.253.97.
220 FTP SERVER CM0956TO (V5.41 23FEB98) ready.
User (204.23.253.97:(none)): dch0085
331 Password required.
Password:
230 Logon accepted.
ftp> dir
200 PORT: command successful.
150 Opening data connection.
/MIX/ DISPLAYSTART
 LIST REPORT FOR DCH0085  ON 04/17/98 AT 11:40
            HEADER                        FROM SOURCE      TO DEST
---------------------------------    ---------------  ---------------
SOURCE   DEST     APPL     REF    STATUS DATE  TIME  ISN  DATE  TIME  OSN
-------- -------- -------- ------ ------ ----- ----- ---- ----- ----- ----
DCHBULL  DCH0085  4276     00342  NORMAL 04/16 09:10 3243 00/00 00:00 0000
DCHBULL  DCH0085  4276     00388  NORMAL 04/17 09:09 3282 00/00 00:00 0000
DCHBULL  DCH0085  1232T    00414  NORMAL 04/17 09:58 3308 00/00 00:00 0000
/MIX/ DISPLAYEND
226 Closing data connection.
800 bytes received in 0.16 seconds (5.00 Kbytes/sec)
ftp> _
```

Figure 5-10:   FTP Window in a Production Environment

5.1.4.1   "Putting" a File on the DEG

When you send an Invoice Processing or Managed Care file to the DEG, take the following steps.

1. Type:
     put<space> <volume>\<directory>\<file> <space> <file number>@<location>
    For example, **put<space>c:\dos\4780@dchedi**, where **c** is the hard drive, **DOS** is the directory, **4780** is the file for the primary care physician, followed by a **space**, the **@** sign, and a location of **dchedi (dch** indicates the Department of Community Health, and **edi** indicates the American National Standards Institute X12 837 transaction format).

2. Once the file is transferred to **dchedi**, translation begins immediately and an ANSI X12 997 Acknowledgment transaction is produced and moved to the sender's mailbox.

3. Enter the **dir** command to see the ANSI X12 997 Acknowledgment **with the name of the file sent.**

4. Download the ANSI X12 997 Acknowledgment file by entering a get command, being careful to change the file name for the destination system so the file sent is not written over. Adding an "a" to the file name would indicate it has been acknowledged.

5.1.4.2 "Getting" a File from the DEG

1. From the window shown in Figure 5-10, type **dir** in response to the ftp> prompt.

2. From the list of files shown, look at the column labeled **APPL**. These are files ready to be retrieved.

3. Type, in this example, **get 4276 c:\download\4276**. This will move the *oldest* 4276 file to the sender's PC. The file will be downloaded to the C drive, in the "download" directory, to file 4276.

5.2 INTERNET SSL CONNECTION/HTTPS

The ability to submit files through the Michigan Data Exchange Gateway using the World Wide Web has recently been established by MDCH. This approach is called the State of Michigan Date Exchange Gateway Web (DEGweb). Instructions for submitting files using the Web are found at the MDCH Web site with this manual. To access the DEGweb instructions, go to www.michigan.gov/mdch, then click Providers, Information for Medicaid Providers, Michigan Medicaid Uniform Billing Project, Electronic Claims Submission Information.

6   FILES EXCHANGED

The File Transfer System provides a standardized way for MDCH to exchange files with outside sources (users, electronic submitters) eligible to bill MDCH for health care services or submit other electronic data. There are two types of files exchanged in claims transactions: (1) files electronic submitters send to MDCH and (2) files MDCH sends to electronic submitters. MDCH sends two types of files to electronic submitters: an acknowledgment for the receipt of a submission and remittance advice regarding each individual claim.

NOTE: The Michigan Department of Community Health is actively working toward implementing the federally mandated Health Insurance Portability and Accountability Act (HIPAA) transaction standards on October 16, 2003. Once the HIPAA standards go into effect, MDCH will only accept HIPAA-compliant transactions. Complete implementation guides for all HIPAA transactions can be obtained through the Washington Publishing Company at www.wpc-edi.com.

6.1   FILES ELECTRONIC SUBMITTERS SEND TO MDCH

6.1.1   Professional Claims

The MDCH implementation guide for version 3051 of the ANSI X12 837 Professional claim transaction set is found on the MDCH Web site: Go to www.michigan.gov/mdch; then click Providers/Information for Medicaid Providers, Michigan Medicaid Uniform Billing Project, Electronic Claims Submission Information, and EDI 837 Professional Version 3051 Transaction Set. Version 4010 of the Professional claim can be obtained from the Washington Publishing Company (www.wpc-edi.com).

Data clarifications for the ANSI X12 837 Professional claim, version 4010, are found at the MDCH Web site.

The specifications for the "envelope" for the ANSI X12 837 Claim transaction are found in this document in Appendix B3.1 for version 3051 and Appendix B3.2 for version 4010.

6.1.2   Institutional Claims

The MDCH implementation guide for the electronic UB-92/EMC 5.0 claim transaction are found on the MDCH Web site. Version 4010 of the Professional claim can be obtained from the Washington Publishing Company (www.wpc-edi.com).

Data clarifications for the ANSI X12 837 Institutional claim, version 4010, are found at the MDCH Web site.

The specifications for the "envelope" for the Institutional claim transaction are found in Appendix B3.2 of this manual.

6.1.3   Dental Claims

Version 4010 of the ANSI X12 Dental claim can be obtained from the Washington Publishing Company (www.wpc-edi.com).

Data clarifications for the ANSI X12 837 Dental claim, version 4010, are also found at that Web site.

6.2   FILES MDCH SENDS TO ELECTRONIC SUBMITTERS

6.2.1   ANSI X12 997 Acknowledgment

Specifications for the ANSI X12 997 Acknowledgment for both versions 3051 and 4010 are found in Appendix C2 of this document.

6.2.2   ANSI X12 835 Remittance Advice

The ANSI X12 835 remittance advice is under development.

7   **RESOURCES FOR ELECTRONIC BILLING**

7.1   PROVIDER POLICY MANUALS

Electronic submitters are urged to obtain the policy manuals applicable to the specific provider types for whom they submit claims. These manuals indicate the policies and procedures used by the MDCH, including a general description, coverages and limitations, and billing and inquiry.

Policy manuals are available at a nominal cost from Program Policy Division, MDCH, P.O. Box 30479, Lansing, Michigan 48909-7979.

Provider manuals are available for the following:

Ambulance

Chiropractor

Community Mental Health Services Board

Dental

Family Planning Clinics

Federally Qualified Health Centers/Tribal Health Centers

Hearing Aid Dealers

Hearing and Speech Centers

Home Health Care

Hospice

Hospital

Laboratory

Long-Term Care (now Nursing Facility)

Maternal and Infant Support Services

Medical Suppliers/Durable Medical Equipment

Medicaid Health Plans

Nursing Facility (formerly Long-Term Care)

Pharmacy

Practitioner (e.g., physicians, advanced practice nurses, podiatrists, and medical clinics)

Private Duty Nursing

School Based Services

Rural Health Clinics

Vision

7.2   ADDITIONAL RESOURCES

The following materials may be obtained from the MDCH in addition to specific claim-type electronic file formats:

- **Bulletins** – Items of information and policy affecting the administration of the Medicaid Program are conveyed through the Medical Assistance Program Bulletin series. Bulletins also communicate procedural changes and transmit revisions to a manual. It is important to keep the manual up to date. Bulletins that do not have accompanying revised manual pages should be kept until the information is incorporated in the manual.

  Bulletins are numbered in sequence for each provider manual noted in the Bulletin Header. Bulletins affecting multiple provider types will have another number assigned in the lower left corner.

  Bulletins are automatically mailed to subscribers of the affected provider manuals. They are also available at the MDCH Web site: Go to www.michigan.gov/mdch then click Providers/Information for Medicaid Providers/Michigan Medicaid Uniform Billing Project.

- **Numbered Letters –** General program information or announcements are transmitted to providers via numbered letters. These letters should be kept for reference.

- **Remittance Advice Messages** – Remittance Advice messages (RAMs) are used to transmit special billing information on specific problems. The messages are numbered consecutively and followed by the year (e.g., 12-01 is the twelfth bulletin issued in 2001). RAMs are included with the Remittance Advices; therefore, the RAMs to any single provider type may not be numbered consecutively.

  RAMs are sent with paper Remittance Advices.

The Michigan Uniform Billing Manual contains information about the UB-92 paper claim form. Providers who submit institutional claims electronically will need this information. The Michigan Uniform Billing Manual is based on the National Uniform Billing Manual but is enhanced to include Michigan-specific billing information. In Michigan, the UB-92 is currently the accepted claim form for Medicare, Blue Cross, TRICARE/CHAMPVA, Worker's Compensation, Medicaid

inpatient and outpatient claims and all commercial insurer and HMO claims.

Subscriptions can be obtained from the following organization:

State Uniform Billing Committee
Michigan Health & Hospital Association
Attention: UB-92 Manual Subscription
6215 W. St. Joseph Highway
Lansing, Michigan 48917-4852
(517) 323-3443

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GLOSSARY

ANSI X12 277 Unsolicited	The X12 standard information about the status of a health care claim.
ANSI X12 835	The X12 standard payment or remittance advice.
ANSI X12 837	The X12 standard health care claim or encounter EDI transaction, used for institutional, professional, and dental claims.
ASCII	American Standard Code for Information Interchange
Automated billing agent	See *Electronic submitter*.
Billing agent ID	A four-digit number in the format ∅∅XX, where the first two digits are zeroes and the last two digits are unique numbers assigned by MDCH to a specific submitter.
Billing Service Company	See *Electronic submitter*.
Bulletin	Items and information and policy affecting the administration of the Medicaid Program; conveyed through the Medical Assistance Program Bulletin series.
Business Associate	HIPAA term for a person who performs a function or activity on behalf of another entity.
CMS	Centers for Medicaid and Medicare Services; formerly the Health Care Financing Administration (HCFA)
CPT	Current Procedural Terminology. Codes used by providers to describe services rendered.
CSHCS	Children's Special Health Care Services
e-biller	See *Electronic submitter*.
Electronic billing agent	See *Electronic submitter*.
Electronic submitter	An individual or agency that submits claims or other data to the MDCH electronically. Also known as an *automated billing agent, billing agent, billing service company, e-biller, or electronic billing agent*
EMC 5.0	Electronic Media Claim version 5.0; also known as the electronic UB-92 claim. It is the electronic version of the paper UB-92 claim form.
HCFA	Health Care Financing Administration; now known as the Center for Medicare and Medicaid Services (CMS)
HCFA 1450	See "UB-92."
HCFA 1500	The Health Care Financing Administration's (now CMS) paper claim form for professional services.

HCPCS	Health Care Procedure Coding System
ICD-9-CM	International Classification of Diseases, Ninth Edition, Clinical Modification
ID	Identifier
IP	Invoice (claim) processing
MDCH	Michigan Department of Community Health
Provider	An individual or organization that provides medical services.
RAM	Remittance advice message
Service Bureau	An organization that submits bills on behalf of a provider; also, an *electronic submitter*.
SHP	Special Health Plan for Children
SMP	State Medical Program
SSL	Secure Sockets Layer; a secure method for submitting information using the World Wide Web.
TR9000	An MDCH-provided software program that writes the required control records for MDCH proprietary and UB-92 files.
Trading Partner	An entity with whom another entity exchanges (sends or receives) information electronically.
UB-92	Uniform Billing Form 92, also known as the "HCFA1450" paper form. The electronic version is the Electronic Media Claim (EMC) version 5.0. This form is used for Institutional claims.

A.   TR9000 FILE PREPARATION PROGRAM INSTRUCTIONS

INTRODUCTION

The TR9000 file preparation program is available electronically at no cost to PC users who request it from AutomatedBilling@michigan.gov. This program builds the **required** File Transfer Control records at the front and back of MDCH UB-92 (EMC 5.0) files before the files are sent to MDCH. Interactive screens let users enter variable fields. MDCH does not require the use of the TR9000; it is provided for those who do not wish to program the logic to write the required control records. Information for creating the header and trailer files manually are found in Appendix B1.

Instructions for using the TR9000 accompany the software. They are found in the file TR9000.doc and are paraphrased in this section.

NOTE: The program requires as much workspace on a PC as the size of the data file. TR9000 writes back to the original path name with the control records and automatically deletes the work area.

HOW THE TR9000 WORKS

A Selection List (TR9000.FIL) is built and maintained using information from the header and trailer records previously created through this program (TR9000). This reduces redundant keying and sets default values for files that are run through this program more than once.

TR9000 will prompt for information needed in the header and trailer records. Any of the default values may be replaced by the user. A temporary file (TR9000.WRK) is written with the new file, including the header and trailer records. At the end of the process the temporary file is written to the input pathname and the temporary file is deleted.

FUNCTIONS OF THE TR9000

The TR9000 can be used for the following purposes:

- To add an entry to the Selection List, and

- To delete an existing entry from the Selection List.

In addition, the TR9000 is run to add header and trailer records to a file after you have:

- Added data to an existing file or

- Created a new file.

INSTALLING THE TR9000

Contact AutomatedBilling@michigan.gov to obtain either downloadable files or a floppy diskette. Instructions for installing the files from either medium are contained within the file TR9000.DOC. Follow those instructions to run the TR9000, as described below

RUNNING THE TR9000

Once the TR9000 is installed on the PC's hard drive, a window similar to that shown in Figure A1 will appear.
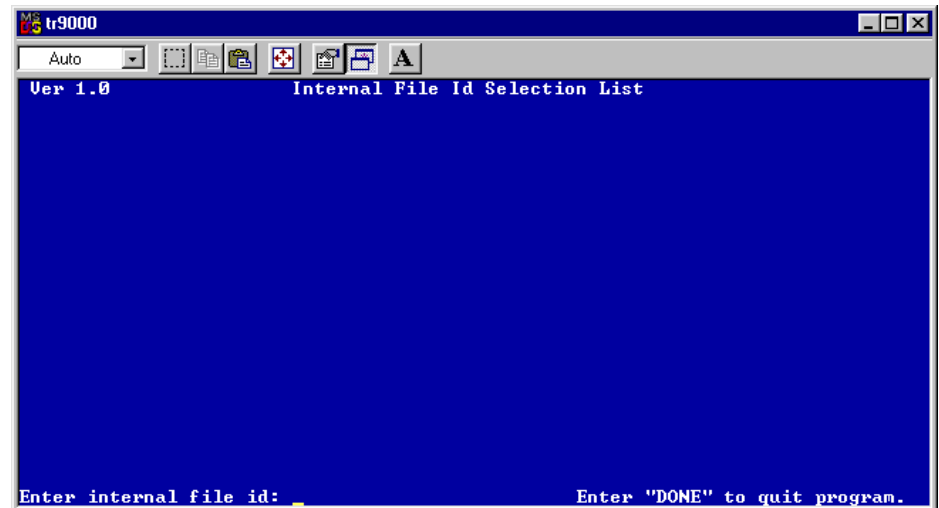
Figure A1:   Sample Initial TR9000 Window.

1. To start the TR9000, in Windows Explorer, double-click the tr9000.exe icon.

2. Enter the eight-character alphanumeric Internal File ID assigned by MDCH. This ID will track many files or variants of the same file (e.g., 3602PMO1, 3602PTU1). **NOTE**: Type "DONE" at any time to quit the program.

3. Enter **3602** at the beginning of the file name for a UB-92 (EMC 5.0) file.

4. Once the Internal File ID has been entered, the following message appears at the bottom of the screen:

Delete, Continue, or Restart < D/C/R >

NOTE: **Do not use the Enter key** after each entry; use either the down arrow or the Tab key.

5. Once all the fields have been completed, press the Enter key.

    a. Pressing **D** will delete an entry from the Selection List, but it will **not** delete the file from your disk.

    b. Pressing **C** brings up the next screen where more detail can be entered about a selected file. (See Figure A2.)

Figure A2:   TR9000 Add/Change/Process Screen

    c. Pressing R indicates an error in the selection and the ID number must be reentered correctly.

The fields on the Add/Change/Process screen have the following meanings:

Batch Number: A 12-character date-and-time field defined in the application as CCYYMMDDHHMM.

Filespec: A 36-character field used to name the file. For example, if there is a data file named 4275 stored in a directory called GLWIN, the pathname would be C:\GLWIN\4275.

Internal File Identification: An unmodifiable 8-character field carried forward from Screen 1 to Screen 2.

Internal File Date: A field filled automatically with the current date that can be changed.

Application Identification: A 2-character field defined as **MA** (for Medicaid Application), used by other application programs.

User Identification: An 8-character (seven characters and a space) field assigned by MDCH to authorized users. This currently is DCH00XX, where XX is the ID of the provider.

Input Count and **Output Count** are provided by the program. The Input Count is the number of records entered, and the Output Count is the same, plus two control records.

Bypass Count: A count of invalid (blank) records or preexisting header and trailer records in a file. "File Contains No Data Records" appears below the Output Count if a file contains only a header and trailer record; such a file would be rejected by the transfer system

The remainder of the program is self-explanatory. Questions about the TR9000 program should be directed to an MDCH File Transfer System analyst at AutomatedBilling@michigan.gov.

B.   FILES SUBMITTERS SEND TO MDCH

This appendix contains information about the files submitters must send to MDCH. These include the following:

B1   MDCH Proprietary Institutional Header and Trailer Records

B2   Modulus Eleven Check-Digit Routine

B3   ANSI X12 837 Claim Interchange Control Structures

B3.1   ANSI X12 837 Professional Claim, version 3051 Interchange Control Structure

B3.2   ANSI X12 837 Professional and Institutional Claims, version 4010 Interchange Control Structures

B1   MDCH PROPRIETARY HEADERS AND TRAILERS

Entities who submit proprietary institutional claims electronically must append header and trailer records to their submissions. These electronic "wrappers" or "envelopes" alert the system of the beginning and ending of a submission.

B1.1   Institutional Proprietary Header Record

The following Proprietary Header Record is required on all UB-92/EMC v5.0 institutional claims submitted to MDCH. Proprietary remittance files sent from MDCH to submitters contain a similar header.

D.E. #	DATA FIELD NAME	PICTURE	USAGE	FROM	THRU
05	EDI – HEADER – RECORD				
	10 EDI – TYPE VALUE "HDDR"	X(4)	4	1	4
	10 EDI – APP VALUE "MA"	X(2)	2	5	6
	10 EDI – USER	X(8)	8	7	14
	VALUE "MMISXXXX" OR "DCHXXXX "				
	XX = SERVICE BUREAU CLAIM ID				
	10 EDI – DATE – CYMD (CREATION DATE)	X(8)	8	15	22
	10 EDI – TRANSFER – DATE (OR USE CREATION DATE)				
	15 TRANSFER – YYYY	X(4)	4	23	26
	15 TRANSFER – MM	X(2)	2	27	28
	15 TRANSFER – DD	X(2)	2	29	30
	15 TRANSFER – HH	X(2)	2	31	32
	15 TRANSFER – MINUTE	X(2)	2	33	34
	10 EDI – FILE				
	15 EDI-FILE-BEG VALUE "3602"	X(4)	4	35	38
	15 EDI-RUN-TYPE	X(1)	1	39	39
	88 PRODUCTION-RUN VALUE "P"				
	88 TEST-RUN VALUE "T"				
	15 EDI-BATCH	X(3)	3	40	42
05	FILLER	X(278)	278	43	320
THIS HEADER FORMAT IS COMMONLY USED FOR THE SUBMISSION AND RETURN OF DATA FILES					
BETWEEN TRADING PARTNERS AND THE DEPT. OF COMMUNITY HEALTH. THIS HEADER AND					
TRAILER RECORD FORMAT **IS REQUIRED ON ALL FILES.**					

SDM-312 FORMAT (11-88)

B1.2   Institutional Proprietary Trailer Record

The following proprietary trailer record is required on all
UB-92/EMC v5.0 institutional claims submitted to MDCH.
Proprietary remittance files sent from MDCH to submitters
contain a similar trailer.

D.E. #	DATA FIELD NAME	PICTURE	USAGE	FROM	THRU
05	EDI – HEADER – RECORD				
	10 EDI – TYPE VALUE "TRLR"	X(4)	4	1	4
	10 EDI – APP VALUE "MA"	X(2)	2	5	6
	10 EDI – USERS	X(8)	8	7	14
	VALUE IS "MMISXXXX" OR VALUE "DCHXXXX "				
	XX = SERVICE BUREAU CLAIM ID				
	10 EDI-DATE-CYMD (CREATION DATE)	X(8)	8	15	22
	10 EDI-TRANSFER-DATE (OR USE CREATION DATE)				
	15 TRANSFER-YYYY	X(4)	4	23	26
	15 TRANSFER-MM	X(2)	2	27	28
	15 TRANSFER-DD	X(2)	2	29	30
	15 TRANSFER-HH	X(2)	2	31	32
	15 TRANSFER-MINUTE	X(2)	2	33	34
	10 EDI-FILE				
	15 EDI-FILE-NUMBER VALUE "3602"	X(4)	4	35	38
	15 EDI-RUN-TYPE	X(1)	1	39	39
	88 PRODUCTION-RUN VALUE "P"				
	88 TEST-RUN VALUE "T"				
	15 EDI-BATCH	X(3)	3	40	42
	10 EDI-RECORD-COUNT	9(6)	6	43	48
	15 EDI-RECORD-COUNT-6 OR				
05	15 EDI-RECORD-COUNT-10				
05	FILLER	X(272)	272	49	320
	(USE THE 6 OR 10 DIGIT EDI-RECORD-COUNT OF YOUR CHOICE)				
	THIS TRAILER FORMAT IS COMMONLY USED FOR THE SUBMISSION AND RETURN OF DATA FILES				
	BETWEEN TRADING PARTNERS AND THE DEPT. OF COMMUNITY HEALTH. THIS HEADER AND				
	TRAILER RECORD FORMAT **IS REQUIRED ON ALL FILES.**				

SDM-312 FORMAT (11-88)

B2   MODULUS ELEVEN CHECK-DIGIT ROUTINE

MDCH-assigned provider IDs incorporate a check-digit assigned by the following Modulus Eleven Check-Digit Routine. The algorithm is presented here so submitters can verify the check-digit before submitting claims. This is provided as reference information only.

a)	Remove the right-most digit (the "check-digit") from the number to be verified and hold the number for a later comparison.
b)	Multiply each remaining digit by its position number, starting at the right-most place as number 1.
c)	Sum the results of *step (b)*.
d)	Divide the sum by 11 and round up to the next highest integer. If the result is an integer, it should not be rounded off.
e)	Multiply the result of *step (d)* by 11.
f)	Subtract the result of *step (c)* from the result of *step (e)*. For recipient ID Numbers, if the result is 10, the number is invalid by definition.
g)	Truncate all but the right-most digit of the result of *step (f)*.
h)	Compare the result of *step (g)* with the number held in storage from *step (a)*. If the numbers compared in *step (h)* are equal, the original ID numbers has the correct check-digit. If the recipient ID does not check, go to *step (i)*.
i)	If the result of *step (g)* is greater than 4, subtract 5; otherwise, add 5.
j)	If this result still does not match the check-digit number stored in *step (a)*, the recipient ID is invalid. The claim should be returned to the provider for correction.
	EXAMPLE: Provider ID Number: 6375412 *step a)* The numeral 2 is held in storage; the new number is 637541. *step b)* – number 6 3 7 5 4 1 position number x6 x5 x4 x3 x2 x1 result 36 15 28 15 8 1 *step c)* 36 + 15 + 28 + 15 + 8 + 1 = 103 *step d)* 103/11 = 9.3, rounded up to 10 *step e)* 10 x 11 = 110 *step f)* 110 – 103 = 7 *step g)* 7 = 7 *step h)* 2 does not equal 7. *step I)* 7 > 4, therefore, subtract 5; 7 – 5 = 2. The number checks.

B3   ANSI X12 837 CLAIM INTERCHANGE CONTROL STRUCTURES

The following pages provide the standards for versions 3051 (for Professional claims only) and 4010 Interchange Control Structures (ICS) (for Professional, Institutional, and Dental claims).

Data clarifications for the 4010 are found at www.michigan.gov/mdch, then click Providers, Information for Medicaid Providers, Michigan Medicaid Uniform Billing Project, Electronic Claims Submission Information.

B3.1   ICS Version 3051

ICS Interchange Control Structures

Functional Group ID=

Introduction:

The purpose of this standard is to define the control structures for the electronic interchange of one or more encoded business transactions including the EDI (Electronic Data Interchange) encoded transactions of Accredited Standards Committee X12. This standard provides the interchange envelope of a header and trailer for the electronic interchange through a data transmission, and it provides a structure to acknowledge the receipt and processing of this envelope.

	Pos. No.	Seg. ID	Name	Req. Des.	Max.Use	Loop Repeat	Notes and Comments
M	010	ISA	Interchange Control Header	M	1		
	020	GS	Functional Group Header	O	1		
	030	GE	Functional Group Trailer	O	1		
M	040	IEA	Interchange Control Trailer	M	1		

B3.1 ICS Version 3051 (continued)

Segment:	**ISA** Interchange Control Header		
Position:	010		
Loop:			
Level:			
Usage:	Mandatory		
Max Use:	1		
Purpose:	To start and identify an interchange of zero or more functional groups and interchange-related control segments		
Syntax Notes:			
Semantic Notes:			
Comments:			

Data Element Summary

	Ref. Des. Attributes	Data Element	Name		
M	ISA01	I01	**Authorization Information Qualifier**	M	ID 2/2
			Code to identify the type of information in the Authorization Information		
			Use "00"		
			00 **No Authorization Information Present (No Meaningful Information in I02)**		
M	ISA02	I02	**Authorization Information**	M	AN 10/10
			Information used for additional identification or authorization of the interchange sender or the data in the interchange; the type of information is set by the Authorization Information Qualifier (I01)		
			Space fill		
M	ISA03	I03	**Security Information Qualifier**	M	ID 2/2
			Code to identify the type of information in the Security Information		
			Use "00"		
			00 **No Security Information Present (No Meaningful Information in I04)**		
M	ISA04	I04	**Security Information**	M	AN 10/10
			This is used for identifying the security information about the interchange sender or the data in the interchange; the type of information is set by the Security Information Qualifier (I03)		
			Space fill		
M	ISA05	I05	**Interchange ID Qualifier**	M	ID 2/2
			Qualifier to designate the system/method of code structure used to designate the sender or receiver ID element being qualified		
			ZZ **Mutually Defined**		
M	ISA06	I06	**Interchange Sender ID**	M	AN 15/15
			Identification code published by the sender for other parties to use as the receiver ID to route data to them; the sender always codes this value in the sender ID element		
			Note:***		
			Positions 1-4: **Your Billing Agent ID number "00XX"**		
			Positions 5-15: **Space fill**		
M	ISA07	I05	**Interchange ID Qualifier**	M	ID 2/2
			Qualifier to designate the system/method of code structure used to designate the sender or receiver ID element being qualified		
			ZZ **Mutually Defined**		

B3.1   ICS Version 3051 (continued)

M	ISA08	I07	**Interchange Receiver ID**	M	**AN 15/15**

Identification code published by the receiver of the data; When sending, it is used by the sender as their sending ID, thus other parties sending to them will use this as a receiving ID to route data to them

Note: ***

Positions 1-6:   "D00111"
Positions 7-15:   Space fill

M	ISA09	I08	**Interchange Date**	M	**DT 6/6**

Date of the interchange

Format YYMMDD

M	ISA10	I09	**Interchange Time**	M	**TM 4/4**

Time of the interchange

Format HHMM

M	ISA11	I10	**Interchange Control Standards Identifier**	M	**ID 1/1**

Code to identify the agency responsible for the control standard used by the message that is enclosed by the interchange header and trailer

USE ONLY THE FOLLOWING VALUE:
   U   U.S. EDI Community of ASC X12, TDCC, and UCS

M	ISA12	I11	**Interchange Control Version Number**	M	**ID 5/5**

This version number covers the interchange control segments

USE ONLY THE FOLLOWING VALUE:

"00305" for version 3051

M	ISA13	I12	**Interchange Control Number**	M	**N0 9/9**

A control number assigned by the interchange sender

Must be identical to IEA02

M	ISA14	I13	**Acknowledgment Requested**	M	**ID 1/1**

Code sent by the sender to request an interchange acknowledgment (TA1)

MDCH will return a 997 upon completion of Translation. Enter the following value only.
   0   No Acknowledgment Requested

M	ISA15	I14	**Test Indicator**	M	**ID 1/1**

Code to indicate whether data enclosed by this interchange envelope is test or production
   P   Production Data
   T   Test Data

M	ISA16	I15	**Component Element Separator**	M	**AN 1/1**

This field provides the delimiter used to separate component data elements within a composite data structure; this value must be different than the data element separator and the segment terminator

MDCH suggests that the following value be uses: ":" (colon)

B3.1   ICS Version 3051 (continued)

Segment:		**GS** Functional Group Header	
Position:		020	
Loop:			
Level:			
Usage:		Optional	
Max Use:		1	
Purpose:		To indicate the beginning of a functional group and to provide control information	
Syntax Notes:			
Semantic Notes:	**1**	GS04 is the group date.	
	2	GS05 is the group time.	
	3	The data interchange control number GS06 in this header must be identical to the same data element in the associated functional group trailer, GE02	
Comments:	**1**	A functional group of related transaction sets, within the scope of X12 standards, consists of a collection of similar transaction sets enclosed by a functional group header and a functional group trailer.	

Data Element Summary

	Ref. Des.	Data Element	Name	Attributes
M	GS01	479	**Functional Identifier Code** Code identifying a group of application related transaction sets **Use "HC"**	M ID 2/2
M	GS02	142	**Application Sender's Code** Code identifying party sending transmission; codes agreed to by trading partners **Use your Billing Agent ID Code, an example would be "00XX"**	M AN 4/4
M	GS03	124	**Application Receiver's Code** Code identifying party receiving transmission; codes agreed to by trading partners **Use "D00111"**	M AN 6/6
M	GS04	373	**Date** Date (YYMMDD) **Format YYMMDD**	M DT 6/6
M	GS05	337	**Time** Time expressed in 24-hour clock time as follows: HHMM, or HHMMSS, or HHMMSSD, or HHMMSSDD, where H = hours (00-23), M = minutes (00-59), S = integer seconds (00-59) and DD = decimal seconds; decimal seconds are expressed as follows: D = tenths (0-9) and DD = hundredths (00-99) **Format HHMM**	M TM 4/4
M	GS06	28	**Group Control Number** Assigned number originated and maintained by the sender **Must be identical to GE02**	M N0 1/9
M	GS07	455	**Responsible Agency Code** Code used in conjunction with Data Element 480 to identify the issuer of the standard **Use "X"** **X** **Accredited Standards Committee X12**	M ID 1/2

M	GS08	480	**Version / Release / Industry Identifier Code**
			 Code indicating the version, release, subrelease, and industry identifier of the EDI standard being used, including the GS and GE segments; if code in DE455 in GS segment is X, then in DE 480 positions 1-3 are the version number; positions 4-6 are the release and subrelease, level of the version; and positions 7-12 are the industry or trade association identifiers (optionally assigned by user); if code in DE455 in GS segment is T, then other formats are allowed
			 Use "003051"
			    003051 **Draft Standards Approved for Publication by ASC X12**
			                      Procedures Review Board through February 1995
				M AN 1/12

B3.1   ICS Version 3051 (continued)

Segment: GE Functional Group Trailer

Position:	030
Loop:	
Level:	
Usage:	Optional
Max Use:	1
Purpose:	To indicate the end of a functional group and to provide control information
Syntax Notes:	
Semantic Notes:	1 The data interchange control number GE02 in this trailer must be identical to the same data element in the associated Functional Header GS06.
Comments:	1 The use of identical data interchange control numbers in the associated functional group header and trailer is designed to maximize functional group integrity. The control number is the same as that used in the corresponding header.

Data Element Summary

	Ref. Des. Attributes	Data Element	Name		
M	GE01	97	**Number of Transaction Sets Included** Total number of transaction sets included in the functional group or interchange (transmission) group terminated by the trailer containing this data element	M	N0 1/6
M	GE02	28	**Group Control Number** Assigned number originated and maintained by the sender	M	N0 1/9

B3.1   ICS Version 3051 (concluded)

Segment:IEA Interchange Control Trailer

Position:	040
Loop:	
Level:	
Usage:	Mandatory
Max Use:	1
Purpose:	To define the end of an interchange of zero or more functional groups and interchange-related control segments
Syntax Notes:	
Semantic Notes:	
Comments:	

Data Element Summary

	Ref. Des.	Data Element	Name	Attributes	
M	IEA01	I16	**Number of Included Functional Groups**	M	N0 1/5
			A count of the number of functional groups included in an interchange		
M	IEA02	I12	**Interchange Control Number**	M	N0 9/9
			A control number assigned by the interchange sender		
			Must be identical to ISA13		

B3.2   ICS Version 4010

ICS Interchange Control Structures

Functional Group ID=

Introduction:

The purpose of this standard is to define the control structures for the electronic interchange of one or more encoded business transactions including the EDI (Electronic Data Interchange) encoded transactions of Accredited Standards Committee X12. This standard provides the interchange envelope of a header and trailer for the electronic interchange through a data transmission, and it provides a structure to acknowledge the receipt and processing of this envelope.

	Pos. No.	Seg. ID	Name	Req. Des.	Max.Use	Loop Repeat	Notes and Comments
M	010	ISA	Interchange Control Header	M	1		
M	020	GS	Functional Group Header	M	1		
M	030	GE	Functional Group Trailer	M	1		
M	040	IEA	Interchange Control Trailer	M	1		

B3.2   ICS Version 4010 (continued)

Segment: **ISA** Interchange Control Header
Position: 010
Loop:
Level:
Usage: Mandatory
Max Use: 1
Purpose: To start and identify an interchange of zero or more functional groups and interchange-related control segments
Syntax Notes:
Semantic Notes:
Comments:

Data Element Summary

	Ref. Des. Attributes	Data Element	Name		
M	ISA01	I01	**Authorization Information Qualifier**	M	ID 2/2

Code to identify the type of information in the Authorization Information
USE THE FOLLOWING VALUE ONLY:
  00   No Authorization Information Present (No Meaningful Information in I02)

M	ISA02	I02	**Authorization Information**	M	AN 10/10

Information used for additional identification or authorization of the interchange sender or the data in the interchange; the type of information is set by the Authorization Information Qualifier (I01)
SPACE FILL

M	ISA03	I03	**Security Information Qualifier**	M	ID 2/2

Code to identify the type of information in the Security Information
USE ONLY THE FOLLOWING VALUE:
  00   No Security Information Present (No Meaningful Information in I04)

M	ISA04	I04	**Security Information**	M	AN 10/10

This is used for identifying the security information about the interchange sender or the data in the interchange; the type of information is set by the Security Information Qualifier (I03)
SPACE FILL.

M	ISA05	I05	**Interchange ID Qualifier**	M	ID 2/2

Qualifier to designate the system/method of code structure used to designate the sender or receiver ID element being qualified
USE ONLY THE FOLLOWING VALUE:
  ZZ   Mutually Defined

M	ISA06	I06	**Interchange Sender ID**	M	AN 15/15

Identification code published by the sender for other parties to use as the receiver ID to route data to them; the sender always codes this value in the sender ID element
NOTE   XXXXXXXX

Position 1-4:   Your Billing Agent ID Number "00XX"
Position 5-15:   Space Fill

M	ISA07	I05	**Interchange ID Qualifier**	M	ID 2/2

Qualifier to designate the system/method of code structure used to designate the sender or receiver ID element being qualified
USE ONLY THE FOLLOWING VALUE:
  ZZ   Mutually Defined

B3.2   ICS Version 4010 (continued)

M	ISA08	I07	**Interchange Receiver ID**	**M**	**AN 15/15**

Identification code published by the receiver of the data; When sending, it is used by the sender as their sending ID, thus other parties sending to them will use this as a receiving ID to route data to them

NOTE   XXXXXXXXX

Position 1-6:   Enter the value: "D00111"
Position 5-15:   Space Fill

M	ISA09	I08	**Interchange Date**	**M**	**DT 6/6**

Date of the interchange

Format is YYMMDD
An example for the date, December 31, 2001
you would use: 011231

M	ISA10	I09	**Interchange Time**	**M**	**TM 4/4**

Time of the interchange

The format is HHMM
Where H = Hours (0-23) and M = Minutes (0-59).
An Example for 02:00 p.m.
you would use: 1400

M	ISA11	I10	**Interchange Control Standards Identifier**	**M**	**ID 1/1**

Code to identify the agency responsible for the control standard used by the message that is enclosed by the interchange header and trailer

USE ONLY THE FOLLOWING VALUE:
   U   U.S. EDI Community of ASC X12, TDCC, and UCS

M	ISA12	I11	**Interchange Control Version Number**	**M**	**ID 5/5**

This version number covers the interchange control segments

USE ONLY THE FOLLOWING VALUE:
   00401   Draft Standards for Trial Use Approved for Publication by
                  ASC X12 Procedures Review Board through October 1997

M	ISA13	I12	**Interchange Control Number**	**M**	**N0 9/9**

A control number assigned by the interchange sender

Must be identical to IEA02.

M	ISA14	I13	**Acknowledgment Requested**	**M**	**ID 1/1**

Code sent by the sender to request an interchange acknowledgment (TA1)

MDCH will provide a 997 Acknowledgment when translation complets.
Use only the following value:
   0   No Acknowledgment Requested

M	ISA15	I14	**Usage Indicator**	**M**	**ID 1/1**

Code to indicate whether data enclosed by this interchange envelope is test, production or information

NOTE:
MDCH will Route and Process this based upon the value selected.
   P   Production Data
   T   Test Data

M	ISA16	I15	**Component Element Separator**	**M**	**AN 1/1**

Type is not applicable; the component element separator is a delimiter and not a data element; this field provides the delimiter used to separate component data elements within a composite data structure; this value must be different than the data element separator and the segment terminator

MDCH suggests you use ":" (colon) as the Component Element Separator.

B3.2   ICS Version 4010 (continued)

Segment: GS Functional Group Header

Position:	020
Loop:	
Level:	
Usage:	Mandatory
Max Use:	1
Purpose:	To indicate the beginning of a functional group and to provide control information
Syntax Notes:	
Semantic Notes:	**1** GS04 is the group date.
	2 GS05 is the group time.
	3 The data interchange control number GS06 in this header must be identical to the same data element in the associated functional group trailer, GE02.
Comments:	**1** A functional group of related transaction sets, within the scope of X12 standards, consists of a collection of similar transaction sets enclosed by a functional group header and a functional group trailer.

Data Element Summary

	Ref. Des. Attributes	Data Element	Name		
M	GS01	479	**Functional Identifier Code**	M	ID 2/2
			Code identifying a group of application related transaction sets		
			HC Health Care Claim (837)		
M	GS02	142	**Application Sender's Code**	M	AN 2/15
			Code identifying party sending transmission; codes agreed to by trading partners		
			Use your Billing Agent ID Code. An example would be "00XX"		
M	GS03	124	**Application Receiver's Code**	M	AN 2/15
			Code identifying party receiving transmission; codes agreed to by trading partners		
			Use only the following value "D00111" for Medicaid.		
M	GS04	373	**Date**	M	DT 8/8
			Date expressed as CCYYMMDD		
			Semantic: GS04 is the Group Date.		
			Use this date for the Functional Group Creation Date.		
M	GS05	337	**Time**	M	TM 4/8
			Time expressed in 24-hour clock time as follows: HHMM, or HHMMSS, or HHMMSSD, or HHMMSSDD, where H = hours (00-23), M = minutes (00-59), S = integer seconds (00-59) and DD = decimal seconds; decimal seconds are expressed as follows: D = tenths (0-9) and DD = hundredths (00-99)		
			Semantic: GS05 is the Group Time.		
			Use this time for the creation time. The recommended format is HHMM.		
M	GS06	28	**Group Control Number**	M	N0 1/9
			Assigned number originated and maintained by the sender		
			Semantic: The data interchange control number GS06 in this header must be identical to the same data element in the associated functionl group trailer GE02.		

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B3.2   ICS Version 4010 (continued)

M	GS07	455	**Responsible Agency Code**	**M ID 1/2**

Code used in conjunction with Data Element 480 to identify the issuer of the standard

Use only the following value: "X"

   X   Accredited Standards Committee X12

M	GS08	480	**Version / Release / Industry Identifier Code**	**M AN 1/12**

Code indicating the version, release, subrelease, and industry identifier of the EDI standard being used, including the GS and GE segments; if code in DE455 in GS segment is X, then in DE 480 positions 1-3 are the version number; positions 4-6 are the release and subrelease, level of the version; and positions 7-12 are the industry or trade association identifiers (optionally assigned by user); if code in DE455 in GS segment is T, then other formats are allowed

Use only one of the following codes:

Code   Definition

"004010X098"   This is to identify the Profession Version Number 4010, of the ASC X12 837 Transaction Set.

"004010X097"   This is to identify the Dental Version Number 4010. of the ASC X12 837 Transaction Set.

"004010X096"   This is to identify the Institutional Version Number 4010. of the ASC X12 837 Transaction Set.

"004010X096T"   "Nursing Facilities" use this is to identify a Test Version of the Institutional Version Number 4010. of the ASC X12 837 Transaction Set.

B3.2   ICS Version 4010 (continued)

Segment: GE Functional Group Trailer

Position:	030
Loop:	
Level:	
Usage:	Mandatory
Max Use:	1
Purpose:	To indicate the end of a functional group and to provide control information
Syntax Notes:	
Semantic Notes:	1 The data interchange control number GE02 in this trailer must be identical to the same data element in the associated functional group header, GS06.
Comments:	1 The use of identical data interchange control numbers in the associated functional group header and trailer is designed to maximize functional group integrity. The control number is the same as that used in the corresponding header.

Data Element Summary

	Ref. Des. Attributes	Data Element	Name		
M	GE01	97	**Number of Transaction Sets Included** Total number of transaction sets included in the functional group or interchange (transmission) group terminated by the trailer containing this data element	M	N0 1/6
M	GE02	28	**Group Control Number** Assigned number originated and maintained by the sender Semantic: The data interchange control number GE02 in this trailer must be identical to the same data element in the associated functional group herder, GS06.	M	N0 1/9

B3.2   ICS Version 4010 (concluded)

Segment:IEA Interchange Control Trailer

Position:	040
Loop:	
Level:	
Usage:	Mandatory
Max Use:	1
Purpose:	To define the end of an interchange of zero or more functional groups and interchange-related control segments
Syntax Notes:	
Semantic Notes:	
Comments:	

Data Element Summary

Attributes	Ref. Des.	Data Element	Name		
M	IEA01	I16	**Number of Included Functional Groups**	M	N0 1/5
			A count of the number of functional groups included in an interchange		
M	IEA02	I12	**Interchange Control Number**	M	N0 9/9
			A control number assigned by the interchange sender		

C   FILES MDCH SENDS TO SUBMITTERS

MDCH sends two types of files to submitters described in the following pages:

C1   ANSI X12 834 Remittance Advice files

C2   ANSI X12 997 Functional Acknowledgment files

There are two versions of ANSI X12 997 Functional Acknowledgment files: Version 3051 and Version 4010. Both are described in the following pages.

C1   ANSI X12 835 REMITTANCE ADVICE

The ANSI X12 835 Remittance advice is under development.

C2   ANSI X12 997 ACKNOWLEDGMENT FILES

The following pages detail the information sent in both version 3051 and 4010 of the ANSI X12 997 Acknowledgment files.

C2.1   ANSI X12 997 Functional Acknowledgment, Version 3051

997 Functional Acknowledgment

Functional Group ID=**FA**

Introduction:

This Draft Standard for Trial Use contains the format and establishes the data contents of the Functional Acknowledgment Transaction Set (997) for use within the context of an Electronic Data Interchange (EDI) environment. The transaction set can be used to define the control structures for a set of acknowledgments to indicate the results of the syntactical analysis of the electronically encoded documents. The encoded documents are the transaction sets, which are grouped in functional groups, used in defining transactions for business data interchange. This standard does not cover the semantic meaning of the information encoded in the transaction sets.

	Pos. No.	Seg. ID	Name	Req. Des.	Max.Use	Loop Repeat	Notes and Comments
M	010	ST	Transaction Set Header	M	1		n1
M	020	AK1	Functional Group Response Header	M	1		n2
			LOOP ID - AK2			999999	
	030	AK2	Transaction Set Response Header	O	1		n3
			LOOP ID - AK3			999999	
	040	AK3	Data Segment Note	O	1		c1
	050	AK4	Data Element Note	O	99		
M	060	AK5	Transaction Set Response Trailer	M	1		
M	070	AK9	Functional Group Response Trailer	M	1		
M	080	SE	Transaction Set Trailer	M	1		

Transaction Set Notes

1. These acknowledgments shall not be acknowledged, thereby preventing an endless cycle of acknowledgments of acknowledgments.
    The Functional Group Header Segment (GS) is used to start the envelope for the Functional Acknowledgment Transaction Sets. In preparing the functional group of acknowledgments, the application sender's code and the application receiver's code, taken from the functional group being acknowledged, are exchanged; therefore, one acknowledgment functional group responds to only those functional groups from one application receiver's code to one application sender's code. There is only one Functional Acknowledgment Transaction Set per acknowledged functional group.
2. AK1 is used to respond to the functional group header and to start the acknowledgement for a functional group. There shall be one AK1 segment for the functional group that is being acknowledged.
3. AK2 is used to start the acknowledgement of a transaction set within the received functional group. The AK2 segments shall appear in the same order as the transaction sets in the functional group that has been received and is being acknowledged.

Transaction Set Comments

1.   The data segments of this standard are used to report the results of the syntatical analysis of the functional groups of transaction sets; they report the extent to which the syntax complies with the standards for transaction sets and functional groups. They do not report on the semantic meaning of the transaction sets (for example, on the ability of the receiver to comply with the request of the sender).

C2.1   ANSI X12 997 Functional Acknowledgment, Version 3051 (continued)

Segment:	**ST** Transaction Set Header	
Position:	010	
Loop:		
Level:		
Usage:	Mandatory	
Max Use:	1	
Purpose:	To indicate the start of a transaction set and to assign a control number	
Syntax Notes:		
Semantic Notes:	1 The transaction set identifier (ST01) is used by the translation routines of the interchange partners to select the appropriate transaction set definition (e.g., 810 selects the Invoice Transaction Set).	
Comments:		
Notes:	997 FUNCTIONAL ACKNOWLEDGMENT	

Data Element Summary

Ref. Des. Attributes	Data Element	Name		
M	**ST01**	**143**	**Transaction Set Identifier Code**	**M ID 3/3**
			Code uniquely identifying a Transaction Set	
			997 FUNCTIONAL ACKNOWLEDGMENT	
			Refer to 003051 Data Element Dictionary for acceptable code values.	
M	**ST02**	**329**	**Transaction Set Control Number**	**M AN 4/9**
			Identifying control number that must be unique within the transaction set functional group assigned by the originator for a transaction set	
			The Transction Set Control Numbers in ST02 and SE02 must be identical. The number is assigned by the originator and must be unique within a functional group (GS-GE). The number also aids in error resolution research. For example, start with the number 0001 and increment from there.	
			Use the corresponding value in SE02 for this transaction set.	

3501LOOP(003051)   September 7, 2001

C2.1 ANSI X12 997 Functional Acknowledgment, Version 3051 (continued)

Segment:	**AK1** Functional Group Response Header
Position:	020
Loop:	
Level:	
Usage:	Mandatory
Max Use:	1
Purpose:	To start acknowledgment of a functional group
Syntax Notes:	
Semantic Notes:	1 AK101 is the functional ID found in the GS segment (GS01) in the functional group being acknowledged.
	2 AK102 is the functional group control number found in the GS segment in the functional group being acknowledged.
Comments:	

Data Element Summary

	Ref. Des. Attributes	Data Element	Name		
M	AK101	479	**Functional Identifier Code**	M	ID 2/2
			Code identifying a group of application related transaction sets		
			HC Health Care Claim (837)		
M	AK102	28	**Group Control Number**	M	N0 1/9
			Assigned number originated and maintained by the sender		
			SEMANTIC: AK102 is the functional group control number found in the GS Segment in the functional group being acknowledged.		

3501LOOP(003051)   September 7, 2001

C2.1   ANSI X12 997 Functional Acknowledgment, Version 3051 (continued)

Segment:	**AK2** Transaction Set Response Header	
Position:	030	
Loop:	AK2 Optional	
Level:		
Usage:	Optional	
Max Use:	1	
Purpose:	To start acknowledgment of a single transaction set	
Syntax Notes:		
Semantic Notes:	1 AK201 is the transaction set ID found in the ST segment (ST01) in the transaction set being acknowledged.	
	2 AK202 is the transaction set control number found in the ST segment in the transaction set being acknowledged.	
Comments:		

Data Element Summary

Ref. Des. Attributes	Data Element	Name		
M	AK201	143	**Transaction Set Identifier Code**	M ID 3/3
			Code uniquely identifying a Transaction Set	
			SEMANTIC: AK201 is the transaction set ID found in the ST Segment in the transaction set being acknowledged.	
		837	X12.86 Health Care Claim	
M	AK202	329	**Transaction Set Control Number**	M AN 4/9
			Identifying control number that must be unique within the transaction set functional group assigned by the originator for a transaction set	
			SEMANTIC: AK202 is the transaction set control number found in the ST Segment in the tranaction set being acknowledged.	

3501LOOP(003051)   September 7, 2001

C2.1   ANSI X12 997 Functional Acknowledgment, Version 3051 (continued)

Segment: **AK3** Data Segment Note
Position: 040
Loop: AK3   Optional
Level:
Usage: Optional
Max Use: 1
Purpose: To report errors in a data segment and identify the location of the data segment
Syntax Notes:
Semantic Notes:
Comments:
Notes: The data segments of this standard are used to report the results of the syntactical analysis of the functional groups of transaction setsl they report the extent to which the syntax complies with the standards for transaction sets and functional groups. They do not report on the semantic meaning of the transaction sets (for example, on the ability of the receiver to comply with the request of the sender).

Data Element Summary

Ref. Des. Attributes	Data Element	Name		
M AK301	721	**Segment ID Code**	**M**	**ID 2/3**
		Code defining the segment ID of the data segment in error (See Appendix A - Number 77)		
		This is the two or three characters which occur at the beginning of a segment.		
M AK302	719	**Segment Position in Transaction Set**	**M**	**N0 1/6**
		The numerical count position of this data segment from the start of the transaction set: the transaction set header is count position 1		
		This is the numeric position number of the segment in the Transaction Set with the ST Segment being position 1..		
AK303	447	**Loop Identifier Code**	**O**	**AN 1/4**
		The loop ID number given on the transaction set diagram is the value for this data element in segments LS and LE		
		The loop ID Number given on the Transaction Set Diagramis recommended as the value for this data segment in the segments LS and LE.		
AK304	720	**Segment Syntax Error Code**	**O**	**ID 1/3**
		Code indicating error found based on the syntax editing of a segment		
		This code is required if an error exists.		
		1 Unrecognized segment ID		
		2 Unexpected segment		
		3 Mandatory segment missing		
		4 Loop Occurs Over Maximum Times		
		5 Segment Exceeds Maximum Use		
		6 Segment Not in Defined Transaction Set		
		7 Segment Not in Proper Sequence		
		8 Segment Has Data Element Errors		

C2.1   ANSI X12 997 Functional Acknowledgment, Version 3051 (continued)

Segment:		**AK4** Data Element Note		
Position:		050		
Loop:		AK3	Optional	
Level:				
Usage:		Optional		
Max Use:		99		
Purpose:		To report errors in a data element and identify the location of the data element		
Syntax Notes:				
Semantic Notes:				
Comments:				

Data Element Summary

	Ref. Des. Attributes	Data Element	Name		
M	AK401	C030	**Position in Segment**	**M**	
			Code indicating the relative position of a simple data element, or the relative position of a composite data structure combined with the relative position of the component data element within the composite data structure, in error; the count starts with 1 for the simple data element or composite data structure immediately following the segment ID		
M	C03001	722	**Element Position in Segment**	**M**	**N0 1/2**
			This is used to indicate the relative position of a simple data element, or the relative position of a composite data structure with the relative position of the component within the composite data structure, in error; in the data segment the count starts with 1 for the simple data element or composite data structure immediately following the segment ID		
	C03002	1528	**Component Data Element Position in Composite**	**O**	**N0 1/2**
			To identify the component data element position within the composite that is in error		
			Used when an error occurs in a composite data element and the composite data element position can be determined.		
	AK402	725	**Data Element Reference Number**	**O**	**N0 1/4**
			Reference number used to locate the data element in the Data Element Dictionary		
			Use when data element number can be determined. The data Element Reference Number fo rthis data element is 725. For example, all reference numbers are found with the segment descriptions in this implementation guide.		
M	AK403	723	**Data Element Syntax Error Code**	**M**	**ID 1/3**
			Code indicating the error found after syntax edits of a data element		
			1	Mandatory data element missing	
			2	Conditional required data element missing.	
			3	Too many data elements.	
			4	Data element too short.	
			5	Data element too long.	
			6	Invalid character in data element.	
			7	Invalid code value.	
			8	Invalid Date	
			9	Invalid Time	
			10	Exclusion Condition Violated	
	AK404	724	**Copy of Bad Data Element**	**O**	**AN 1/99**
			This is a copy of the data element in error		
			Used to provide a copy of erroneous data to the original submitte, but this is not used if the error reported is an invalid character.		

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C2.1 ANSI X12 997 Functional Acknowledgment, Version 3051 (continued)

Segment:	**AK5** Transaction Set Response Trailer
Position:	060
Loop:	AK2 Optional
Level:	
Usage:	Mandatory
Max Use:	1
Purpose:	To acknowledge acceptance or rejection and report errors in a transaction set
Syntax Notes:	
Semantic Notes:	
Comments:	

Data Element Summary

Ref. Des. Attributes	Data Element	Name		
M AK501	717	**Transaction Set Acknowledgment Code**	M	ID 1/1
		Code indicating accept or reject condition based on the syntax editing of the transaction set		
		A Accepted		
		E Accepted But Errors Were Noted		
		M Rejected, Message Authentication Code (MAC) Failed		
		R Rejected		
		W Rejected, Assurance Failed Validity Tests		
		X Rejected, Content After Decryption Could Not Be Analyzed		
AK502	718	**Transaction Set Syntax Error Code**	O	ID 1/3
		Code indicating error found based on the syntax editing of a transaction set		
		1 Transaction Set Not Supported		
		2 Transaction Set Trailer Missing		
		3 Transaction Set Control Number in Header and Trailer Do Not Match		
		4 Number of Included Segments Does Not Match Actual Count		
		5 One or More Segments in Error		
		6 Missing or Invalid Transaction Set Identifier		
		7 Missing or Invalid Transaction Set Control Number		
		8 Authentication Key Name Unknown		
		9 Encryption Key Name Unknown		
		10 Requested Service (Authentication or Encrypted) Not Available		
		11 Unknown Security Recipient		
		12 Incorrect Message Length (Encryption Only)		
		13 Message Authentication Code Failed		
		15 Unknown Security Originator		
		16 Syntax Error in Decrypted Text		
		17 Security Not Supported		
		19 S1E Security End Segment Missing for S1S Security Start Segment		
		20 S1S Security Start Segment Missing for S1E Security End Segment		
		21 S2E Security End Segment Missing for S2S Security Start Segment		
		22 S2S Security Start Segment Missing for S2E Security End Segment		
		23 Transaction Set Control Number Not Unique within the Functional Group		
AK503	718	**Transaction Set Syntax Error Code**	O	ID 1/3
		Code indicating error found based on the syntax editing of a transaction set		
		Use the same codes indicated in AK502.		
		Refer to 003051 Data Element Dictionary for acceptable code values.		

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C2.1   ANSI X12 997 Functional Acknowledgment, Version 3051 (continued)

AK504	**718**	**Transaction Set Syntax Error Code**	**O**	**ID 1/3**

Code indicating error found based on the syntax editing of a transaction set
Use the same codes indicated in AK502.
Refer to 003051 Data Element Dictionary for acceptable code values.

AK505	**718**	**Transaction Set Syntax Error Code**	**O**	**ID 1/3**

Code indicating error found based on the syntax editing of a transaction set
Use the same codes indicated in AK502.
Refer to 003051 Data Element Dictionary for acceptable code values.

AK506	**718**	**Transaction Set Syntax Error Code**	**O**	**ID 1/3**

Code indicating error found based on the syntax editing of a transaction set
Use the same codes indicated in AK502.
Refer to 003051 Data Element Dictionary for acceptable code values.

C2.1 ANSI X12 997 Functional Acknowledgment, Version 3051 (continued)

Segment:	**AK9** Functional Group Response Trailer
Position:	070
Loop:	
Level:	
Usage:	Mandatory
Max Use:	1
Purpose:	To acknowledge acceptance or rejection of a functional group and report the number of included transaction sets from the original trailer, the accepted sets, and the received sets in this functional group
Syntax Notes:	
Semantic Notes:	
Comments:	1 If AK901 is 'A' or 'E', then the transmitted functional group is accepted. If AK901 is 'R', then the transmitted group is rejected.

Data Element Summary

Ref. Des. Attributes	Data Element	Name		
M **AK901**	715	**Functional Group Acknowledge Code**	**M**	**ID 1/1**

Code indicating accept or reject condition based on the syntax editing of the functional group

Comment, if AK901 contains the value "A" or "E", then the transmitted functional group is accepted.

A	Accepted
E	Accepted, But Errors Were Noted.
M	Rejected, Message Authentication Code (MAC) Failed
P	Partially Accepted, At Least One Transaction Set Was Rejected
R	Rejected
W	Rejected, Assurance Failed Validity Tests
X	Rejected, Content After Decryption Could Not Be Analyzed

Ref. Des. Attributes	Data Element	Name		
M **AK902**	97	**Number of Transaction Sets Included**	**M**	**N0 1/6**

Total number of transaction sets included in the functional group or interchange (transmission) group terminated by the trailer containing this data element

This is the value in the original GE01.

Ref. Des. Attributes	Data Element	Name		
M **AK903**	123	**Number of Received Transaction Sets**	**M**	**N0 1/6**

Number of Transaction Sets received

Ref. Des. Attributes	Data Element	Name		
M **AK904**	2	**Number of Accepted Transaction Sets**	**M**	**N0 1/6**

Number of accepted Transaction Sets in a Functional Group

Ref. Des. Attributes	Data Element	Name		
AK905	716	**Functional Group Syntax Error Code**	**O**	**ID 1/3**

Code indicating error found based on the syntax editing of the functional group header and/or trailer

1	Functional Group Not Supported
2	Functional Group Version Not Supported
3	Functional Group Trailer Missing
4	Group Control Number in the Functional Group Header and Trailer Do Not Agree
5	Number of Included Transaction Sets Does Not Match Actual Count
6	Group Control Number Violates Syntax
10	Authentication Key Name Unknown
11	Encryption Key Name Unknown
12	Requested Service (Authentication or Encryption) Not Available
13	Unknown Security Recipient
14	Unknown Security Originator
15	Syntax Error in Decrypted Text

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C2.1   ANSI X12 997 Functional Acknowledgment, Version 3051 (continued)

16	Security Not Supported
17	Incorrect Message Length (Encryption Only)
18	Message Authentication Code Failed
19	S1E Security End Segment Missing for S1S Security Start Segment
20	S1S Security Start Segment Missing for S1E End Segment
21	S2E Security End Segment Missing for S2S Security Start Segment
22	S2S Security Start Segment Missing for S2E Security End Segment

AK906   **716**   **Functional Group Syntax Error Code**   **O   ID 1/3**
Code indicating error found based on the syntax editing of the functional group header
and/or trailer
Use the same codes indicated in AK905.
Refer to 003051 Data Element Dictionary for acceptable code values.

AK907   **716**   **Functional Group Syntax Error Code**   **O   ID 1/3**
Code indicating error found based on the syntax editing of the functional group header
and/or trailer
Use the same codes indicated in AK905.
Refer to 003051 Data Element Dictionary for acceptable code values.

AK908   **716**   **Functional Group Syntax Error Code**   **O   ID 1/3**
Code indicating error found based on the syntax editing of the functional group header
and/or trailer
Use the same codes indicated in AK905.
Refer to 003051 Data Element Dictionary for acceptable code values.

AK909   **716**   **Functional Group Syntax Error Code**   **O   ID 1/3**
Code indicating error found based on the syntax editing of the functional group header
and/or trailer
Use the same codes indicated in AK905.
Refer to 003051 Data Element Dictionary for acceptable code values.

C2.1   ANSI X12 997 Functional Acknowledgment, Version 3051 (concluded)

Segment: **SE** Transaction Set Trailer
Position: 080
Loop:
Level:
Usage: Mandatory
Max Use: 1
Purpose: To indicate the end of the transaction set and provide the count of the transmitted segments (including the beginning (ST) and ending (SE) segments).
Syntax Notes:
Semantic Notes:
Comments: 1   SE is the last segment of each transaction set.

Data Element Summary

	Ref. Des. Attributes	Data Element	Name		
M	SE01	96	**Number of Included Segments**	M	N0 1/10
			Total number of segments included in a transaction set including ST and SE segments		
M	SE02	329	**Transaction Set Control Number**	M	AN 4/9
			Identifying control number that must be unique within the transaction set functional group assigned by the originator for a transaction set		
			The Transction Set Control Numbers in ST02 and SE02 must be identical. The number is assigned by the originator and must be unique within a functional group (GS-GE). The number also aids in error resolution research. For example, start with the number 0001 and increment from there.		

C2.2   ANSI X12 997 Functional Acknowledgment, Version 4010

997 Functional Acknowledgment

Functional Group ID=FA

Introduction:

This Draft Standard for Trial Use contains the format and establishes the data contents of the Functional Acknowledgment Transaction Set (997) for use within the context of an Electronic Data Interchange (EDI) environment. The transaction set can be used to define the control structures for a set of acknowledgments to indicate the results of the syntactical analysis of the electronically encoded documents. The encoded documents are the transaction sets, which are grouped in functional groups, used in defining transactions for business data interchange. This standard does not cover the semantic meaning of the information encoded in the transaction sets.

	Pos. No.	Seg. ID	Name	Req. Des.	Max.Use	Loop Repeat	Notes and Comments
M	010	ST	Transaction Set Header	M	1		n1
M	020	AK1	Functional Group Response Header	M	1		n2
			LOOP ID - AK2			999999	
	030	AK2	Transaction Set Response Header	O	1		n3
			LOOP ID - AK3			999999	
	040	AK3	Data Segment Note	O	1		c1
	050	AK4	Data Element Note	O	99		
M	060	AK5	Transaction Set Response Trailer	M	1		
M	070	AK9	Functional Group Response Trailer	M	1		
M	080	SE	Transaction Set Trailer	M	1		

Transaction Set Notes

1. These acknowledgments shall not be acknowledged, thereby preventing an endless cycle of acknowledgments of acknowledgments. Nor shall a Functional Acknowledgment be sent to report errors in a previous Functional Acknowledgment.
    The Functional Group Header Segment (GS) is used to start the envelope for the Functional Acknowledgment Transaction Sets. In preparing the functional group of acknowledgments, the application sender's code and the application receiver's code, taken from the functional group being acknowledged, are exchanged; therefore, one acknowledgment functional group responds to only those functional groups from one application receiver's code to one application sender's code. There is only one Functional Acknowledgment Transaction Set per acknowledged functional group.
2. AK1 is used to respond to the functional group header and to start the acknowledgement for a functional group. There shall be one AK1 segment for the functional group that is being acknowledged.
3. AK2 is used to start the acknowledgement of a transaction set within the received functional group. The AK2 segments shall appear in the same order as the transaction sets in the functional group that has been received and is being acknowledged.

Transaction Set Comments

1. The data segments of this standard are used to report the results of the syntactical analysis of the functional groups of transaction sets; they report the extent to which the syntax complies with the standards for transaction sets and functional groups. They do not report on the semantic meaning of the transaction sets (for example, on the ability of the receiver to comply with the request of the sender).

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C2.2   ANSI X12 997 Functional Acknowledgment, Version 4010 (continued)

Segment:	**ST** **Transaction Set Header**
Position:	010
Loop:	
Level:	
Usage:	Mandatory
Max Use:	1
Purpose:	To indicate the start of a transaction set and to assign a control number
Syntax Notes:	
Semantic Notes:	1 The transaction set identifier (ST01) is used by the translation routines of the interchange partners to select the appropriate transaction set definition (e.g., 810 selects the Invoice Transaction Set).
Comments:	

Data Element Summary

	Ref. Des. Attributes	Data Element	Name		
M	ST01	143	**Transaction Set Identifier Code**	M	ID 3/3
			Code uniquely identifying a Transaction Set		
			276 Health Care Claim Status Request		
			837 Health Care Claim		
M	ST02	329	**Transaction Set Control Number**	M	AN 4/9
			Identifying control number that must be unique within the transaction set functional group assigned by the originator for a transaction set		

The Transaction Set Control Number in ST02 and SE02 must be identical. The number is assigned by the originator and must be unique within a functional group (GS-GE). The number also aids in error resolution research. For example, start with the numnber 0001 and increment from there.

Use the corresponding value in SE02 for this transaction set.

C2.2   ANSI X12 997 Functional Acknowledgment, Version 4010 (continued)

Segment:	$AK1$ Functional Group Response Header
Position:	020
Loop:	
Level:	
Usage:	Mandatory
Max Use:	1
Purpose:	To start acknowledgment of a functional group
Syntax Notes:	
Semantic Notes:	1 AK101 is the functional ID found in the GS segment (GS01) in the functional group being acknowledged.
	2 AK102 is the functional group control number found in the GS segment in the functional group being acknowledged.
Comments:	

Data Element Summary

Ref. Des. Attributes	Data Element	Name		
M **AK101**	479	**Functional Identifier Code**	M	ID 2/2
		Code identifying a group of application related transaction sets		
		HC Health Care Claim (837)		
		HR Health Care Claim Status Request (276)		
M **AK102**	28	**Group Control Number**	M	N0 1/9
		Assigned number originated and maintained by the sender		
		SEMANTIC: AK102 is the functional group control number found in the GS Segment in the functional group being acknowledged.		

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C2.2 ANSI X12 997 Functional Acknowledgment, Version 4010 (continued)

Segment: **AK2** Transaction Set Response Header
Position: 030
Loop: AK2   Optional
Level:
Usage: Optional
Max Use: 1
Purpose: To start acknowledgment of a single transaction set
Syntax Notes:
Semantic Notes: 1 AK201 is the transaction set ID found in the ST segment (ST01) in the transaction set being acknowledged.
2 AK202 is the transaction set control number found in the ST segment in the transaction set being acknowledged.
Comments:

Data Element Summary

Ref. Des. Attributes	Data Element	Name			
M AK201	143	**Transaction Set Identifier Code**	M	ID 3/3	

Code uniquely identifying a Transaction Set

SEMANTIC: AK201 is the transaction set ID found in hte ST Segment in the transaction set being acknowledged.

| | | 276 | Health Care Claim Status Request |
| | | 837 | Health Care Claim |

| M   AK202 | 329 | **Transaction Set Control Number** | M | AN 4/9 |

Identifying control number that must be unique within the transaction set functional group assigned by the originator for a transaction set

SEMANTIC: AK202 is the transaction set control number found in the ST Segment in the transaction set being acknowledged.

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C2.2   ANSI X12 997 Functional Acknowledgment, Version 4010 (continued)

Segment: **AK3** Data Segment Note
Position: 040
Loop: AK3   Optional
Level:
Usage: Optional
Max Use: 1
Purpose: To report errors in a data segment and identify the location of the data segment
Syntax Notes:
Semantic Notes:
Comments:

Data Element Summary

Ref. Des. Attributes	Data Element	Name		
M AK301	721	**Segment ID Code**	M	ID 2/3
		Code defining the segment ID of the data segment in error (See Appendix A - Number 77)		
		This is the two or three characters which occur at the beginning of a segment.		
M AK302	719	**Segment Position in Transaction Set**	M	N0 1/6
		The numerical count position of this data segment from the start of the transaction set: the transaction set header is count position 1		
		This is the numeric position number of the error segment in the Transaction Set with the ST Segment being position 1.		
AK303	447	**Loop Identifier Code**	O	AN 1/6
		The loop ID number given on the transaction set diagram is the value for this data element in segments LS and LE		
AK304	720	**Segment Syntax Error Code**	O	ID 1/3
		Code indicating error found based on the syntax editing of a segment		
		This code is required if an error exists.		

1	Unrecognized segment ID
2	Unexpected segment
3	Mandatory segment missing
4	Loop Occurs Over Maximum Times
5	Segment Exceeds Maximum Use
6	Segment Not in Defined Transaction Set
7	Segment Not in Proper Sequence
8	Segment Has Data Element Errors

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C2.2   ANSI X12 997 Functional Acknowledgment, Version 4010 (continued)

Segment: **AK4** Data Element Note
Position: 050
Loop: AK3   Optional
Level:
Usage: Optional
Max Use: 99
Purpose: To report errors in a data element or composite data structure and identify the location of the data element
Syntax Notes:
Semantic Notes: 1   In no case shall a value be used for AK404 that would generate a syntax error, e.g., an invalid character.
Comments:

Data Element Summary

Attributes	Ref. Des.	Data Element	Name		
M	AK401	C030	**Position in Segment**	M	
			Code indicating the relative position of a simple data element, or the relative position of a composite data structure combined with the relative position of the component data element within the composite data structure, in error; the count starts with 1 for the simple data element or composite data structure immediately following the segment ID		
M	C03001	722	**Element Position in Segment**	M	N0 1/2
			This is used to indicate the relative position of a simple data element, or the relative position of a composite data structure with the relative position of the component within the composite data structure, in error; in the data segment the count starts with 1 for the simple data element or composite data structure immediately following the segment ID		
	C03002	1528	**Component Data Element Position in Composite**	O	N0 1/2
			To identify the component data element position within the composite that is in error		
	AK402	725	**Data Element Reference Number**	O	N0 1/4
			Reference number used to locate the data element in the Data Element Dictionary		
			Used when the data element number can be determined. For example, the Data Element Reference Number for this data element is 725. All references numbers are found with the segment descripton in the implementation guide.		
M	AK403	723	**Data Element Syntax Error Code**	M	ID 1/3
			Code indicating the error found after syntax edits of a data element		
			1 Mandatory data element missing		
			2 Conditional required data element missing.		
			3 Too many data elements.		
			4 Data element too short.		
			5 Data element too long.		
			6 Invalid character in data element.		
			7 Invalid code value.		
			8 Invalid Date		
			9 Invalid Time		
			10 Exclusion Condition Violated		
	AK404	724	**Copy of Bad Data Element**	O	AN 1/99
			This is a copy of the data element in error		
			Used to provide a copy of erroneous data to the original submitter, but this is not used if the error reported is an invalid character.		

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C2.2   ANSI X12 997 Functional Acknowledgment, Version 4010 (continued)

Segment: **AK5** Transaction Set Response Trailer
Position: 060
Loop: AK2   Optional
Level:
Usage: Mandatory
Max Use: 1
Purpose: To acknowledge acceptance or rejection and report errors in a transaction set
Syntax Notes:
Semantic Notes:
Comments:

Data Element Summary

Ref. Des. Attributes	Data Element	Name		
M AK501	717	**Transaction Set Acknowledgment Code**	M	ID 1/1
		Code indicating accept or reject condition based on the syntax editing of the transaction set		
		A Accepted		
		E Accepted But Errors Were Noted		
		M Rejected, Message Authentication Code (MAC) Failed		
		R Rejected		
		W Rejected, Assurance Failed Validity Tests		
		X Rejected, Content After Decryption Could Not Be Analyzed		
AK502	718	**Transaction Set Syntax Error Code**	O	ID 1/3
		Code indicating error found based on the syntax editing of a transaction set		
		1 Transaction Set Not Supported		
		2 Transaction Set Trailer Missing		
		3 Transaction Set Control Number in Header and Trailer Do Not Match		
		4 Number of Included Segments Does Not Match Actual Count		
		5 One or More Segments in Error		
		6 Missing or Invalid Transaction Set Identifier		
		7 Missing or Invalid Transaction Set Control Number		
		8 Authentication Key Name Unknown		
		9 Encryption Key Name Unknown		
		10 Requested Service (Authentication or Encrypted) Not Available		
		11 Unknown Security Recipient		
		12 Incorrect Message Length (Encryption Only)		
		13 Message Authentication Code Failed		
		15 Unknown Security Originator		
		16 Syntax Error in Decrypted Text		
		17 Security Not Supported		
		19 S1E Security End Segment Missing for S1S Security Start Segment		
		20 S1S Security Start Segment Missing for S1E Security End Segment		
		21 S2E Security End Segment Missing for S2S Security Start Segment		
		22 S2S Security Start Segment Missing for S2E Security End Segment		
		23 Transaction Set Control Number Not Unique within the Functional Group		
		24 S3E Security End Segment Missing for S3S Security Start Segment		

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C2.2   ANSI X12 997 Functional Acknowledgment, Version 4010 (continued)

	25		S3S Security Start Segment Missing for S3E Security End Segment		
	26		S4E Security End Segment Missing for S4S Security Start Segment		
	27		S4S Security Start Segment Missing for S4E Security End Segment		
AK503	**718**	**Transaction Set Syntax Error Code**		**O**	**ID 1/3**
		Code indicating error found based on the syntax editing of a transaction set			
		Use the same codes indicated in AK502.			
AK504	**718**	**Transaction Set Syntax Error Code**		**O**	**ID 1/3**
		Code indicating error found based on the syntax editing of a transaction set			
		Use the same codes indicated in AK502.			
AK505	**718**	**Transaction Set Syntax Error Code**		**O**	**ID 1/3**
		Code indicating error found based on the syntax editing of a transaction set			
		Use the same codes indicated in AK502.			
AK506	**718**	**Transaction Set Syntax Error Code**		**O**	**ID 1/3**
		Code indicating error found based on the syntax editing of a transaction set			
		Use the same codes indicated in AK502.			

C2.2 ANSI X12 997 Functional Acknowledgment, Version 4010 (continued)

Segment:	**AK9** Functional Group Response Trailer
Position:	070
Loop:	
Level:	
Usage:	Mandatory
Max Use:	1
Purpose:	To acknowledge acceptance or rejection of a functional group and report the number of included transaction sets from the original trailer, the accepted sets, and the received sets in this functional group
Syntax Notes:	
Semantic Notes:	
Comments:	1 If AK901 contains the value "A" or "E", then the transmitted functional group is accepted.

Data Element Summary

Attributes	Ref. Des.	Data Element	Name		
M	AK901	715	**Functional Group Acknowledge Code**	M	ID 1/1
			Code indicating accept or reject condition based on the syntax editing of the functional group		
			If AK901 contains the value "A" or "E", then the transmitted function group is accepted.		
			A Accepted		
			E Accepted, But Errors Were Noted.		
			M Rejected, Message Authentication Code (MAC) Failed		
			P Partially Accepted, At Least One Transaction Set Was Rejected		
			R Rejected		
			W Rejected, Assurance Failed Validity Tests		
			X Rejected, Content After Decryption Could Not Be Analyzed		
M	AK902	97	**Number of Transaction Sets Included**	M	N0 1/6
			Total number of transaction sets included in the functional group or interchange (transmission) group terminated by the trailer containing this data element		
			This is the value in the original GE01.		
M	AK903	123	**Number of Received Transaction Sets**	M	N0 1/6
			Number of Transaction Sets received		
M	AK904	2	**Number of Accepted Transaction Sets**	M	N0 1/6
			Number of accepted Transaction Sets in a Functional Group		
	AK905	716	**Functional Group Syntax Error Code**	O	ID 1/3
			Code indicating error found based on the syntax editing of the functional group header and/or trailer		
			1 Functional Group Not Supported		
			2 Functional Group Version Not Supported		
			3 Functional Group Trailer Missing		
			4 Group Control Number in the Functional Group Header and Trailer Do Not Agree		
			5 Number of Included Transaction Sets Does Not Match Actual Count		
			6 Group Control Number Violates Syntax		
			10 Authentication Key Name Unknown		
			11 Encryption Key Name Unknown		
			12 Requested Service (Authentication or Encryption) Not Available		
			13 Unknown Security Recipient		
			14 Unknown Security Originator		
			15 Syntax Error in Decrypted Text		
			16 Security Not Supported		
			17 Incorrect Message Length (Encryption Only)		
			18 Message Authentication Code Failed		

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19		S1E Security End Segment Missing for S1S Security Start Segment
20		S1S Security Start Segment Missing for S1E End Segment
21		S2E Security End Segment Missing for S2S Security Start Segment
22		S2S Security Start Segment Missing for S2E Security End Segment
23		S3E Security End Segment Missing for S3S Security Start Segment
24		S3S Security Start Segment Missing for S3E End Segment
25		S4E Security End Segment Missing for S4S Security Start Segment
26		S4S Security Start Segment Missing for S4E Security End Segment

AK906   716   Functional Group Syntax Error Code   O   ID 1/3
Code indicating error found based on the syntax editing of the functional group header and/or trailer
Use the same codes indicated in AK905.

AK907   716   Functional Group Syntax Error Code   O   ID 1/3
Code indicating error found based on the syntax editing of the functional group header and/or trailer
Use the same codes indicated in AK905.

AK908   716   Functional Group Syntax Error Code   O   ID 1/3
Code indicating error found based on the syntax editing of the functional group header and/or trailer
Use the same codes indicated in AK905.

AK909   716   Functional Group Syntax Error Code   O   ID 1/3
Code indicating error found based on the syntax editing of the functional group header and/or trailer
Use the same codes indicated in AK905.

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C2.2   ANSI X12 997 Functional Acknowledgment, Version 4010 (concluded)

Segment: **SE** Transaction Set Trailer
Position: 080
Loop:
Level:
Usage: Mandatory
Max Use: 1
Purpose: To indicate the end of the transaction set and provide the count of the
transmitted segments (including the beginning (ST) and ending (SE) segments)
Syntax Notes:
Semantic Notes:
Comments: 1   SE is the last segment of each transaction set.

Data Element Summary

Ref. Des. Attributes	Data Element	Name		
M SE01	96	**Number of Included Segments**	M	N0 1/10
		Total number of segments included in a transaction set including ST and SE segments		
M SE02	329	**Transaction Set Control Number**	M	AN 4/9
		Identifying control number that must be unique within the transaction set functional group assigned by the originator for a transaction set		
		The Transaction Set Control Number in ST02 and SE02 must be identical. The number is assigned by the originator and must be unique within a functional group (GS-GE). The number also aids in error resolution research. For example, start with the numnber 0001 and increment from there.		

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